

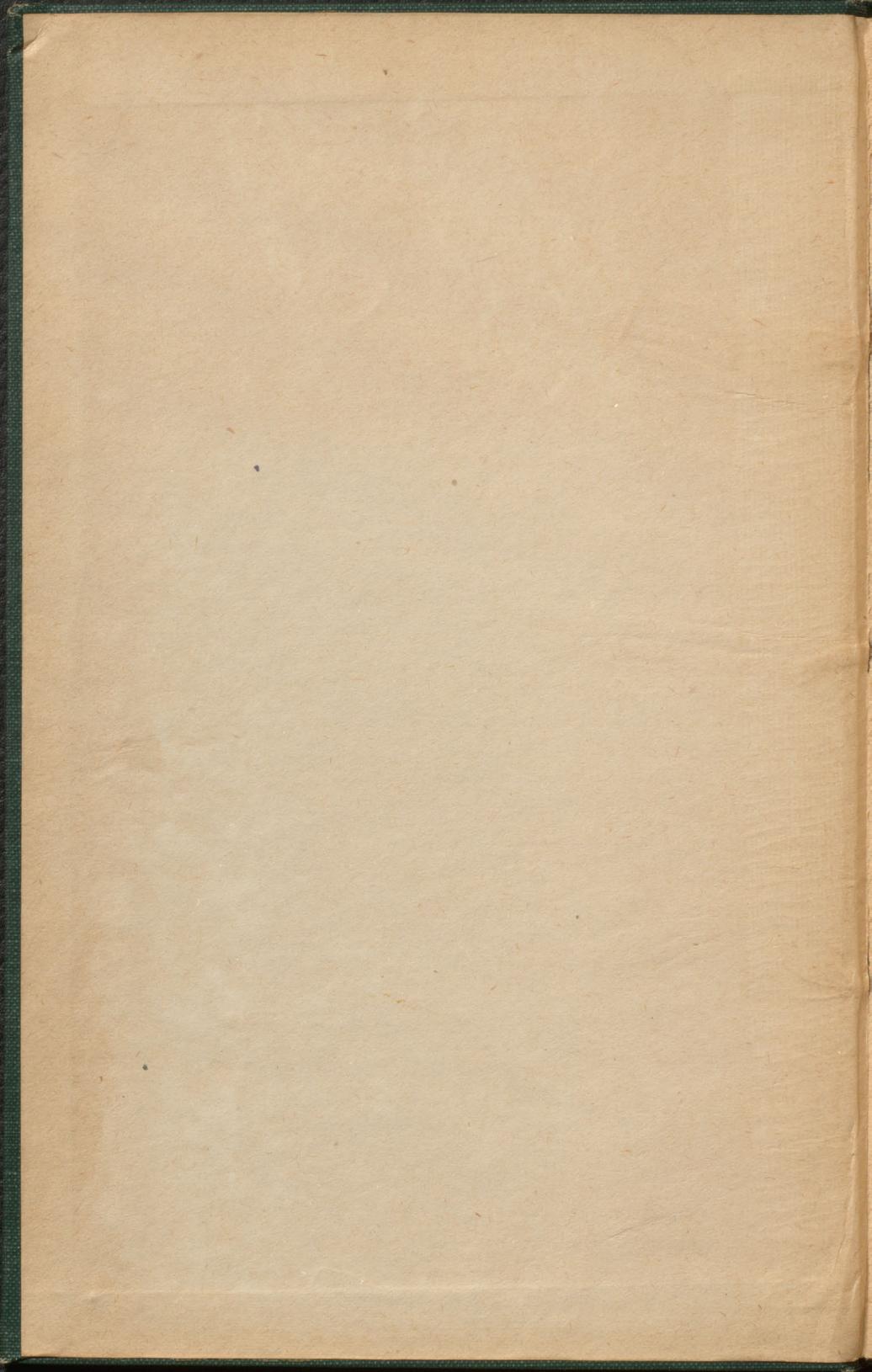


MCGILL

OBSTETRIC NOTE BOOK.

J. C. CAMERON, M.D.

38/65/z/8
1/2



*of
12/27/03*
Peymon F. Stein
Med. '07

321 Dr. Blair & McGee.

MCGILL
OBSTETRIC
NOTE BOOK,

BY

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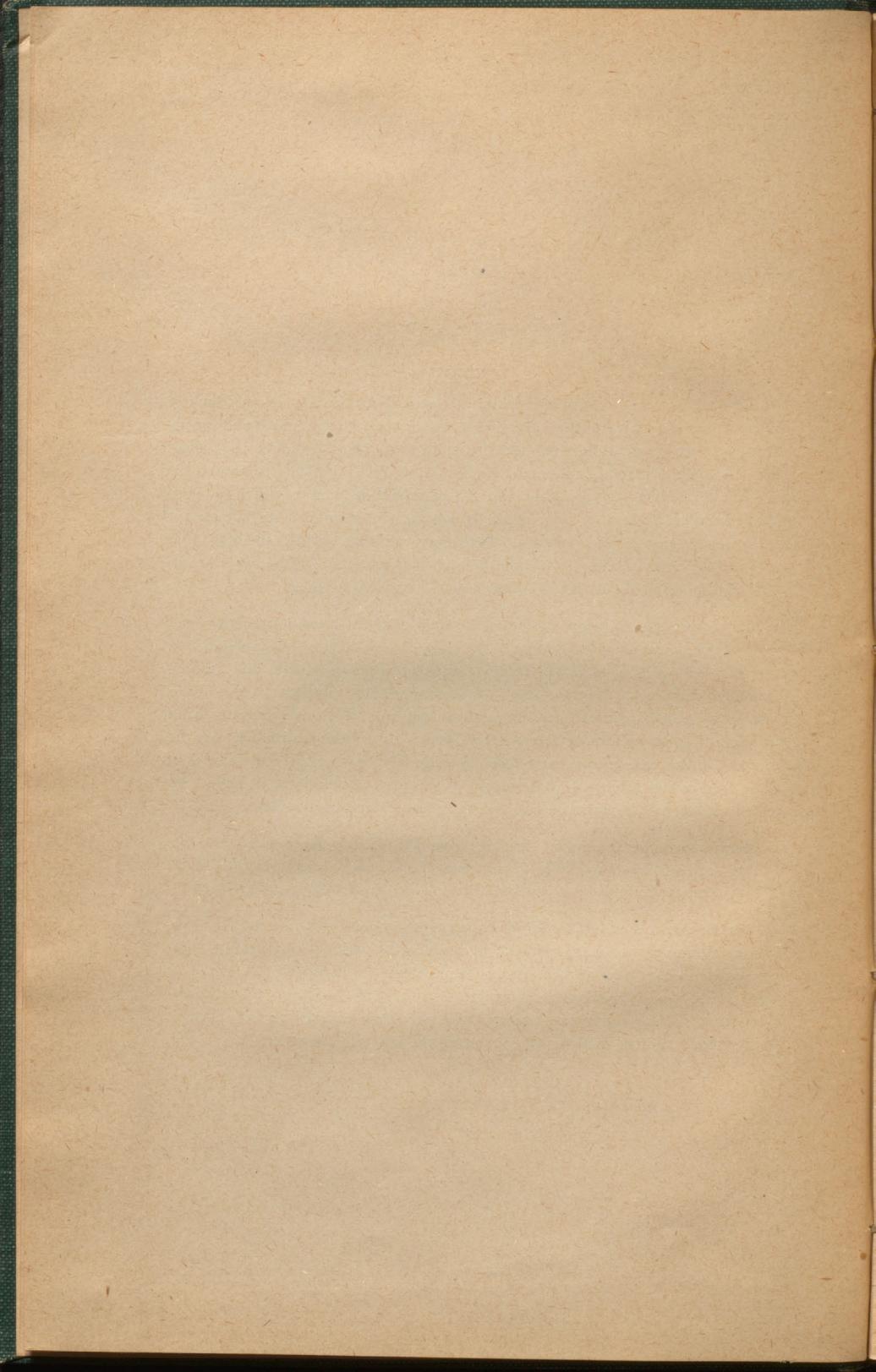
P R E F A C E.

Want of success in Obstetric Work is traceable to carelessness and lack of method on the part of the obstetrician rather than to ignorance and incompetence. It is well therefore for the student to learn from the very outset how to make a careful, systematic examination of his patient, to know what he should observe during labor and the puerperium, and to learn how to report what he observes. The methods which he learns as a student are apt to be those which he will use as a practitioner, and he should remember that six or eight cases thoroughly worked up and well reported will be more profitable than a much larger number observed in a careless manner.

At the present day great attention is being paid to external palpation and pelvimetry as means of diagnosis. The cuts of the various presentations and positions will aid the student in mapping out the foetal members, and gaining a mental picture of the attitude of the foetus and its relations to the uterus and pelvis. Strassmann's excellent outline-diagrams which are used in Berlin for recording the results of external palpation, have been appended, and the blanks for the case-reports have been arranged somewhat after the model of those used in the Montreal Maternity. A number of useful tables have been added, which will be found serviceable for reference and comparison.

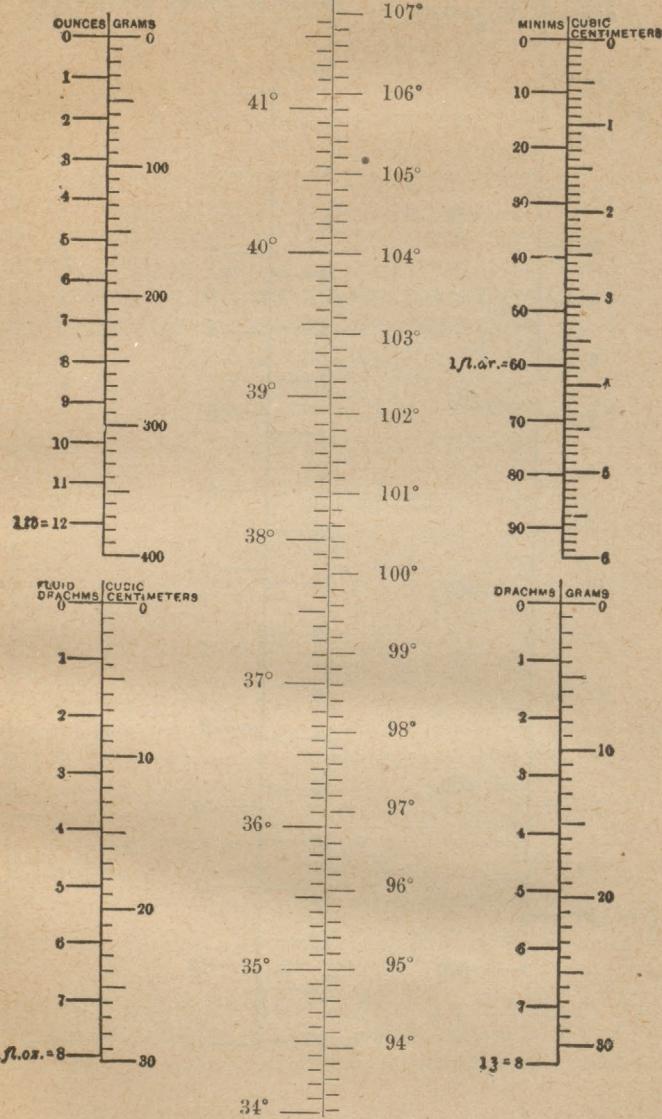
Some formulæ for infant feeding from Dr Holt's excellent little book, "The Care and Feeding of Children," have been added; these will be found useful when artificial feeding is necessary or when early weaning is desirable.

As the metric system is coming rapidly into general use, the student is recommended to record measurements in centimetres, weights in grammes, and capacities in c.c., placing the English equivalents in brackets. It would be well also to put in brackets the equivalents in C. of the ordinary F. temperature, when writing up the case-reports. He will thus familiarize himself with both systems and the methods of converting the one into the other.



THERMOMETER TABLE.

CENTIGRADE FAHRENHEIT
SCALE. SCALE.



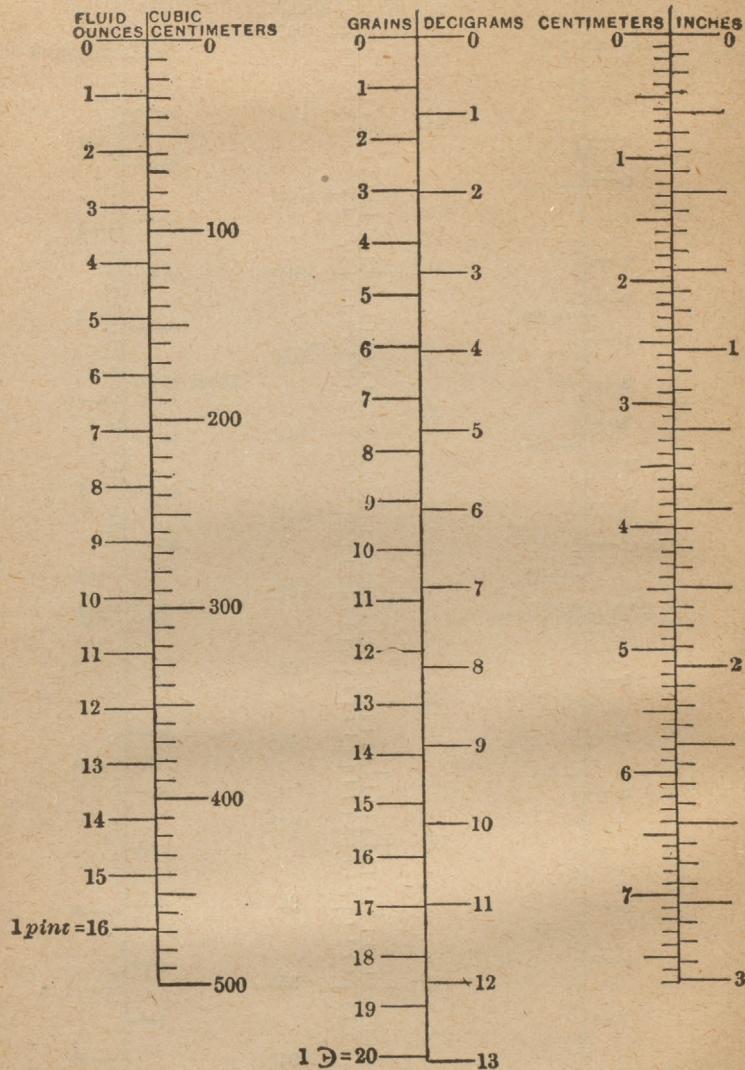


TABLE CALCULATING THE DURATION OF GESTATION.

Jan.	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31			
Oct.	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	1	2	3	4	5	6	7	Nov.		
Feb.	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28						
Nov.	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	1	2	3	4	5		Dec.			
March	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31			
Dec.	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	1	2	3	4	5		Jan.	
April	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30				
Jan.	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	1	2	3	4			Feb.	
May	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31			
Feb.	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	1	2	3	4	5	6	7	March		
June	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30				
March	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	1	2	3	4	5	6		April		
July	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31			
April	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	1	2	3	4	5	6	7	May	
Aug.	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31			
May	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	1	2	3	4	5	6	7	June		
Sept.	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30				
June	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	1	2	3	4	5	6	7		July		
Oct.	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31			
July	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	1	2	3	4	5	6	7	Aug.		
Nov.	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30				
Aug.	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	1	2	3	4	5	6	7		Sept.	
Dec.	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31			
Sept.	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	1	2	3	4	5	6	7		Oct.

DIRECTIONS FOR USING TABLE.—As labor occurs in the larger proportion of cases between 270 and 290 days from the last menstruation, it is usual to reckon from the first day of this period, taking as the mean 280 days. The table presents at a glance the beginning and end of 280 days for every day in the year. Find the date of the menstruation in the upper line of the horizontal column, and the figure below, with the corresponding month, will indicate 280 days.

Pelvimetry on the Living Patient.

Between the ant. sup. spines,	- - - - -	26 centimetres (10.24 in.)
Maximum distance between the crests,	- - - - -	28 " (11.02 in.)
External conjugate,	- - - - -	19½ to 20½ " (7.68 to 8.07 in.)
Diagonal "	- - - - -	12.5 " (4.92 in.)
True "	- - - - -	10 " (4.33 in.)

N.B.—To get the conj. ver. from the conj. diag. subtract 1.5 to 2 cm. (59 to 79 in.), according to the depth of the symphysis, the height of the promontory and the angle between the symphysis and conjugate.

Circumference of pelvis over the symphysis, under the crest of the ilium and over the middle of the sacrum behind,	- - - - -	90 centimeters (35.43 in.)
Between the ischial tuberosities,	- - - - -	11 " (4.33 in.)
Between the trochanters,	- - - - -	31 " (12.20 in.)
From the lower margin of the symphysis to the tip of the sacrum,	- - - - -	9.5 " (3.74 in.)

—:—:—

Weights & Measures—English & Metric Equivalents.

WEIGHT—I gramme = 15.432 grains (15½ nearly.)
1 centigramme = .01 gramme = 0.15432 grains (2/13 nearly.)
1 milligramme = .001 " = .015 " (1/65 nearly.)
1 kilogramme (kilo) = 1000 grammes = 15432.3487 grains = 2.2046 lbs (2 1/5 lbs.)
1 lb. avoirdupois = 16 oz. = 7000 grains = 453.593 grammes.
1 oz. " = 437.5 " = 28.3495 "
1 grain " = .0648 "

CAPACITY—I litre = 1000 grammes = 1 1/18 quarts (35 1/4 fl. oz. and 11 minims.)
1 centilitre = 100 " = 1/3 fl. oz. (Clinically 1 fl. oz. = 30 Cc. is sufficiently accurate in most cases and is easy to calculate. If greater accuracy is required, 1 fl. oz. = 29.52 Cc.)
1 millimetre (cubic centimetre) = measure of 1 gramme of water = 1/30 fl. oz. = 15½ grains.

LENGTH—I metre = 39.370432 inches (3 ft. 3 3/8 in.)
1 centimetre = .3937 " (3/8 in. approx.)
1 millimetre = .03937 " (1/32 in. approx.)
1 foot = 12 inches = 304.79726 millimetres (.305 metre.)
1 inch = 25.39977 " (.0254 metre.)

	NORMAL URINE.	URINE IN PREGNANCY.	URINE IN PUERPERIUM.
Colour.	Pale Yellow.	Pale Yellow.	Red, or reddish brown.
Quantity in 24 hours.	36 oz. (1100 Cc.)	30-80 oz. (900-2400 Cc.)	50-65 oz. (1500-1950 Cc.)
Odour.	Aromatic.	Aromatic.	Often has the odour of drugs.
Reaction.	Acid.	Acid.	Acid or slightly alkaline.
Spec. Grav.	1015-1020	1010-1030. Av. 1014.	1020-1030
Total Solids.	926 grs. (60 Gm.)	500-1100 grs. (32-71 Gm.) Av. 900-1100 grs. (58-71 Gm.)	926-1650 grs. (60-107 Gm.)
Urea.	310-460 grs. (20-30 Gm.)	310-540 grs. (20-35 Gm.)	310-556 grs. (20-36 Gm.)
Albumin.	Absent.	Present in 5 % of cases.	Present in 60 % of cases.
Sugar.	Absent.	Lactose sometimes present.	Lactose sometimes present.
Acetone.	Absent.	Absent.	Absent.
Diacetic Acid.	Absent.	Absent.	Absent.
Indican.	Small quantity.	Absent.	Absent.
Phosphoric Acid.	1.5-2 Gm. in 24 hours.	0.13-2 Gm. in 24 hours,	1.5-5 Gm. in 24 hours.

The urine in pregnancy may vary considerably in the quantity and quality of its various constituents and still be within normal limits, i.e., no constitutional symptoms may occur and pregnancy may terminate favourably for mother and child.

COLOUR.—Varies with the quantity—concentrated urine is high coloured ; dilute urine is pale. Bile gives a greenish yellow colour ; blood, a red or reddish brown colour.

QUANTITY.—Varies greatly according to season, diet, exercise, &c. ; warm weather and little liquid in the diet tend to lessen the quantity of urine. Cool weather and diminished perspiration increase the quantity. The amount usually increases markedly after confinement.

ODOUR.—As in health. Specially noticeable are the ammoniacal odour of alkaline decomposing urine, sweetish odour of urine containing acetone, and the odour of drugs given during labour or the puerperium.

Reaction.—Same as in non-pregnant state and subject to same variations.

SPEC. GRAVITY.—Generally lower in pregnancy and higher in puerperium.

TOTAL SOLIDS.—The normal amount of solids in the urine is about 4 %. The chief components are urea and common salt ; but the proportion of solids to water varies much in health and more in disease. To ascertain the total solids in urine clinically, 3 methods are commonly used :

Trapp.—Multiply the last two figures of the sp. gr. by 2 ; the result gives approximately the number of grammes in 1000 Cc. of urine.

Haeser.—Multiply the last two figures of sp. gr. by 2.33 to get the number of grammes of solids in 1000 Cc. of urine.

Haines.—Multiply the last two figures of the sp. gr. by the total number of oz. passed in 24 hours ; multiply the product by 1.1, and the result will give the number of grains of solids in 24 hours.

UREA is the most important of the solids. It is formed by the liver chiefly from nitrogenous matters in the food, but also to a certain extent sometimes from the destruction of red blood corpuscles in the liver, and from other tissues. Its *formation* is diminished by fasting, and by diseases or drugs which depress the functions or destroy the substance of the liver. Its *elimination* is diminished by whatever diminishes the amount of urine. The quantity of urea usually increases rapidly after confinement, reaching sometimes to 20 or 30 Gm. daily, although it may have been very scant before labour. Practically, no concern need be felt where the daily excretion of urea is 400–500 grs. ; 300 grs. or under should call for dieting and eliminative treatment.

Albumin is very important in pregnancy. An amount of .05 % or over should lead to frequent periodical examination of the urine.

SUGAR.—*Lactosuria* occurs occasionally in pregnancy and the puerperium; it is not considered pathological. *Glycosuria* is always pathological; it is sometimes of nervous origin; especially in the puerperium.

ACETONE AND DIACETIC ACID.—A trace is found in 30 % of pregnant women and has no particular clinical significance unless it is present in large amount (.005-.01 %) and is associated with Diacetic Acid. It is then supposed to indicate profound toxæmia. Its frequency notably increases in diseases complicating pregnancy and the puerperium. In puerperal Eclampsia, it is found in max frequency and intensity, without being dependent upon convulsive acts. It is generally more marked in cases of Syphilis. It cannot be considered as a certain sign of the death of the Foetus.

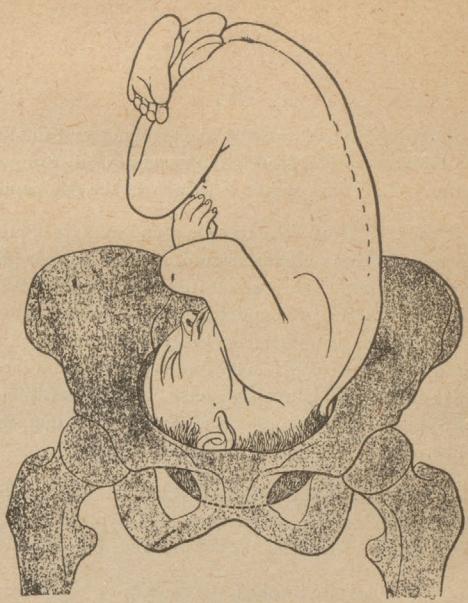
INDICAN is found normally in all urine. It occurs in excess in Eclampsia and in threatened Eclampsia, in constipation, typhoid fever, derangement of the central and peripheral nervous system, in cancer, etc.

PHOSPHORIC ACID is usually diminished, the amount varying from .13-.17 Gm. The normal amount in the non-pregnant state is about 2 Gm.

The sample of urine for examination should be taken from the mixed urine of the 24 hours. This is important.

In private practice, it may not be convenient to get a sample of the 24 hours urine for examination; in such a case it will be usually accurate enough to mix the morning urine with that of the previous evening, and examine a sample of the mixed urine as early as possible during the course of the day.

In converting fl. oz. into Cc., it is sufficiently accurate to calculate 30 Cc. = 1 fl. oz. If greater accuracy is required, 29.52 Cc. = 1 fl. oz.



1.—VERTEX PRESENTATION.—1st position.
Occipito—Left—Anterior.



2.—VERTEX PRESENTATION.—2nd position.
Occipito—Right—Anterior.



3.—VERTEX PRESENTATION.—3rd position.
Occipito—Right—Posterior.



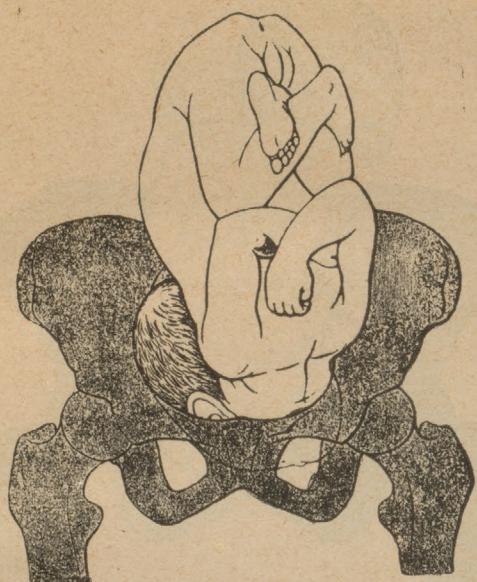
4.—VERTEX PRESENTATION.—4th position.
Occipito—Left—Posterior.



5—FACE PRESENTATION.—1st position.
Mento—Left—Posterior.



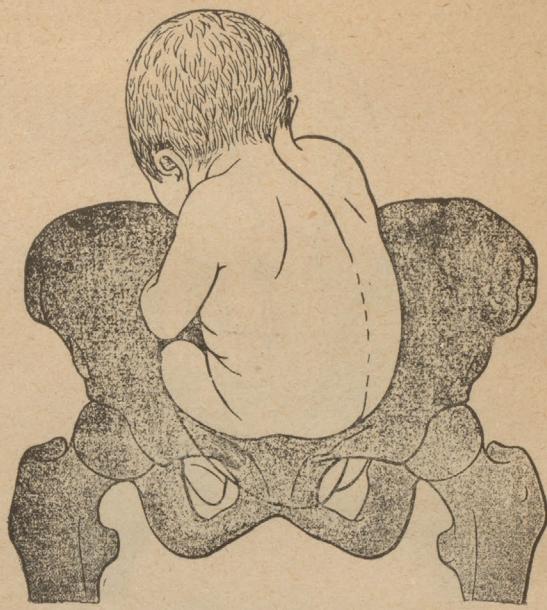
6—FACE PRESENTATION.—2nd position.
Mento—Right—Posterior.



7.—FACE PRESENTATION.—3rd position.
Mento—Right—Anterior.



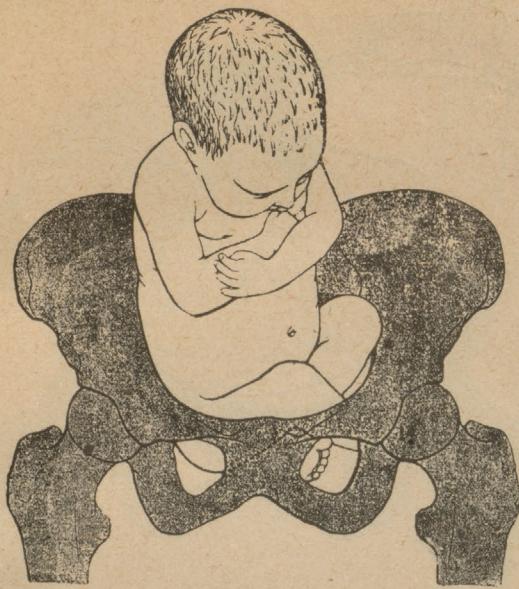
8.—FACE PRESENTATION.—4th position.
Mento—Left—Anterior.



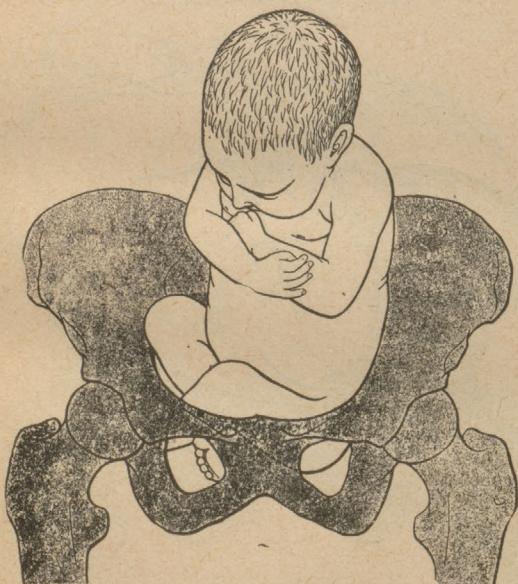
9—BREACH PRESENTATION.—1st position.
Sacro—Left—Anterior.



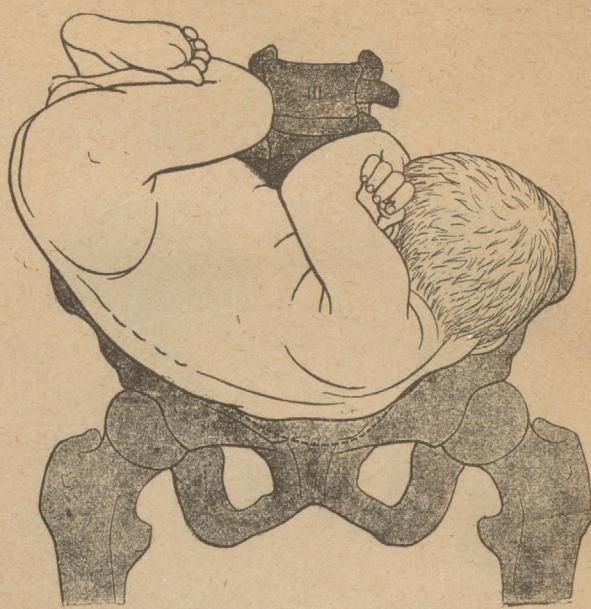
10—BREACH PRESENTATION.—2nd position.
Sacro—Right—Anterior.



11.—BREECH PRESENTATION.—3rd position.
Sacro—Right—Posterior.



12.—BREECH PRESENTATION.—4th position.
Sacro—Left—Posterior.



13—SHOULDER PRESENTATION.—1st position.
Scapula—Left—Anterior.



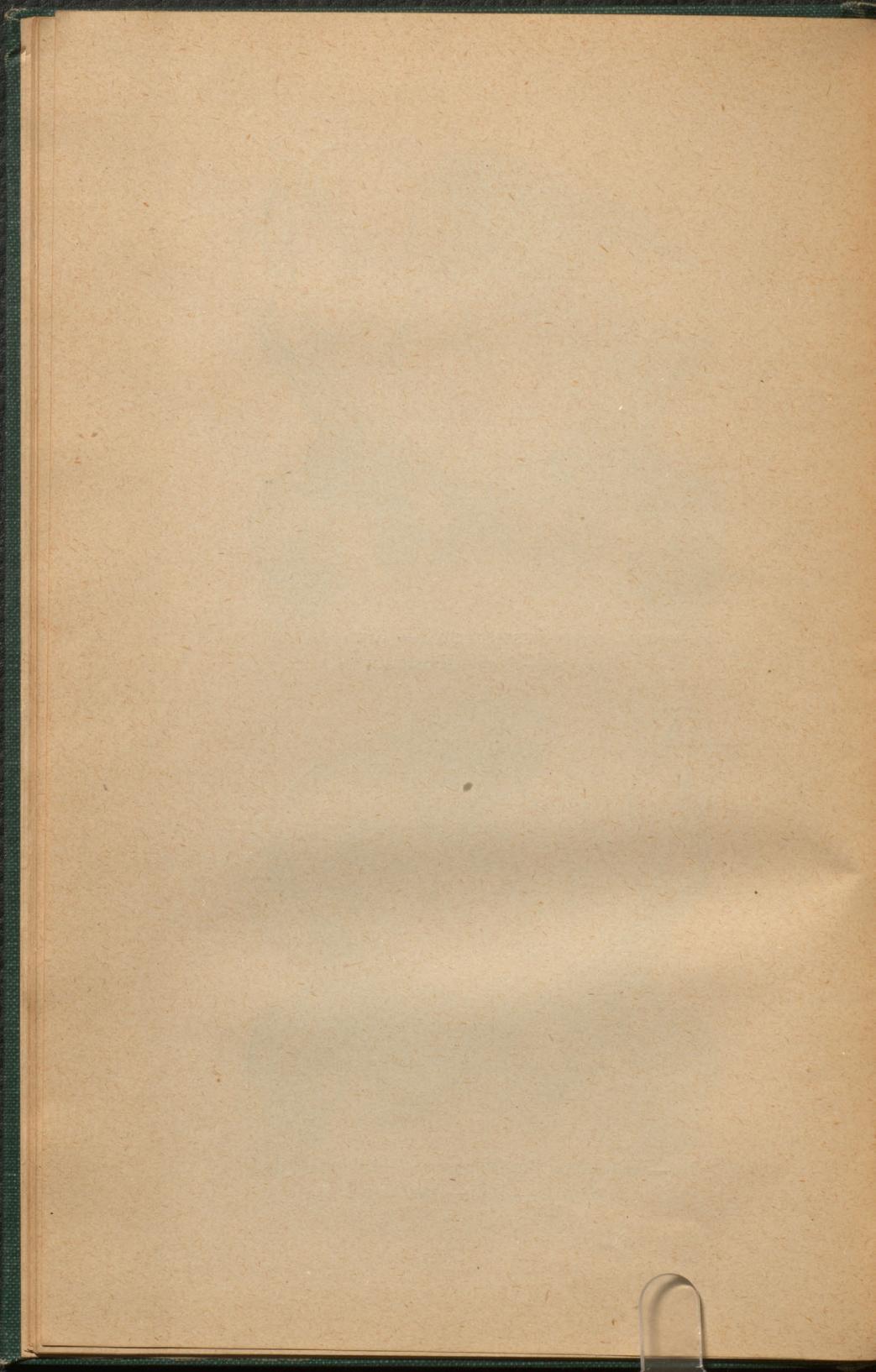
14—SHOULDER PRESENTATION.—2nd position.
Scapula—Right—Anterior.



15.—SHOULDER PRESENTATION.—3rd position.
Scapula—Right—Posterior.



16.—SHOULDER PRESENTATION.—4th position.
Scapula—Left—Posterior.



RECORD OF CASES.

Not to be Examined

CASE NO. 1.

Name and Age Pollock, Regia

Occupation Housewife { M. yes
S

Admitted 3pm Nov 21/06

Delivered 8.59 pm Nov 21 Duration
of Preg.

Discharged

Phys. Exam.—Heart ; Lungs ; Liver ; Spleen

Menstruation.—Began at 14 year; Interval 28 days; Duration 4.5 days; Pain No ; { Before Scanty.
During Moderate.
After Profuse.

Previous Pregnancies.—No 10; Full term 6; Premature 4; { At what month Miscarriages
Cause.

Vomiting Headache Oedema Other symptoms

Previous Labours 6 { Normal Complications
Complicated

Child { Born Alive yes 6 Weight Abnormalities
“ Dead

Treatment { Medicinal
Operative

CASE NO. 1.—(Continued.)

Previous Puerperiums.—Fever..... Breasts..... Nursing.....

Complications {
and Treatment }.....

Last Menstruation Began..... ; Ended..... ; Amount.....

Present Pregnancy.—Quickening..... ; Vomiting—From to { Slight.
Severe. }
Moderate.

Headache..... ; Oedema..... ; Albuminuria.....

Other Symptoms and Treatment : { Constipation.....
Diarrhoea.....
Hemorrhoids.....
Vaginal Discharge.....
Tension.....

Examination.—Date..... ; Breasts..... ; Nipples..... ; Milk.....

Abdomen.—Shape..... ; Umbilicus..... ; Fundus..... (cm. in.) above S ; F. H.....

<i>Pelvis.</i> — Cr. cm. in.)	<i>Perineum.</i> — { Intact..... Repaired.....	<i>Vagina.</i> — Size..... Length..... Secretion.....	<i>Cervix.</i> — { Intact..... Repaired..... { Long..... Short..... { Ext. Os. Int. Os. Secretion.....	<i>Urine in 24 hrs.</i> — Reaction..... Sp. gr. Album. Sugar..... Casts..... Urea..... Total Solids.....
Sp. (.... in.)				
Conj. Ext. (.... in.)	{ Long.....			
Conj. Diag. (.... in.)	{ Short.....			
Conj. Ver. (.... in.)	{ Rigid.....			
B.I. (.... in.)	{ Dilatable.....			

Remarks......

LABOUR.

1ST STAGE.—Pres.....; Position.....; Pains.....; F.H..... Head { Above
Breech { In
Below Brim.

Cervix { Rigid Dilatable Vagina

Mechanism Attitude
..... Posture

Chlorof. { Obstet. degree { Continuously By D. Hammond) From..... A.M.
Ether. { Surgical " { Intermittently To..... P.M. Total.....
A.M. P.M.

Treat.....

LABOUR.—(Continued.)

3RD STAGE.

Placenta.—Pres. Decidua; Complete Weight Gm. (..... oz.)
 Incomplete ,

Membranes.—Complete Condition
 Incomplete ,

Cord.—Length cm. (..... in.); Insertion

Around { Neck 3 times { Tight
 Part Loose, Treat.

Perineum.—Ruptured } Cause ; Sutures { Vag.
 Unruptured } Perin. Kind
 Rect.

Hemorrhage, { Slight ; How controlled
 Moderate, When
 Severe Weighed, { Amount
 Estimated 350 cc .

Douche { Vagin. Why? Kind Uterin. Amount	Mother's condition hrs. P.P.
---	---

Temp. 98.3 Pulse 96 Resp. @ 8. p.m.

Fundus

Treat. <u>3 Catgut in R. Cervix</u>	Temp.	U. during interval <u>150 c.c.</u>
-------------------------------------	------------	------------------------------------

OPERATION.

Forceps.—Kind Operation { High,
Medium, } Easy,
Low, Difficult,

Indication.....

Position of patient. { Dorsal.
Lateral.

Lower Blade A.M. Locked

Upper " A.M. Removed P.M. { Before delivery,
After

Traction ; Compression

Version.—Kind

Int. Version.

Indication ~~os~~ dilatate, mem. not ruptured

Position of patient dorsal

Began 3.30 P.M. { Easy yes

Ended 3.55 P.M. { Difficult

Delivery 3.59 P.M. { Spontaneous

Artificial

Breech.—Diagnosis by { Int. Exam.

Ext. "

Position

Position during extraction { Dorsal.
Lateral.

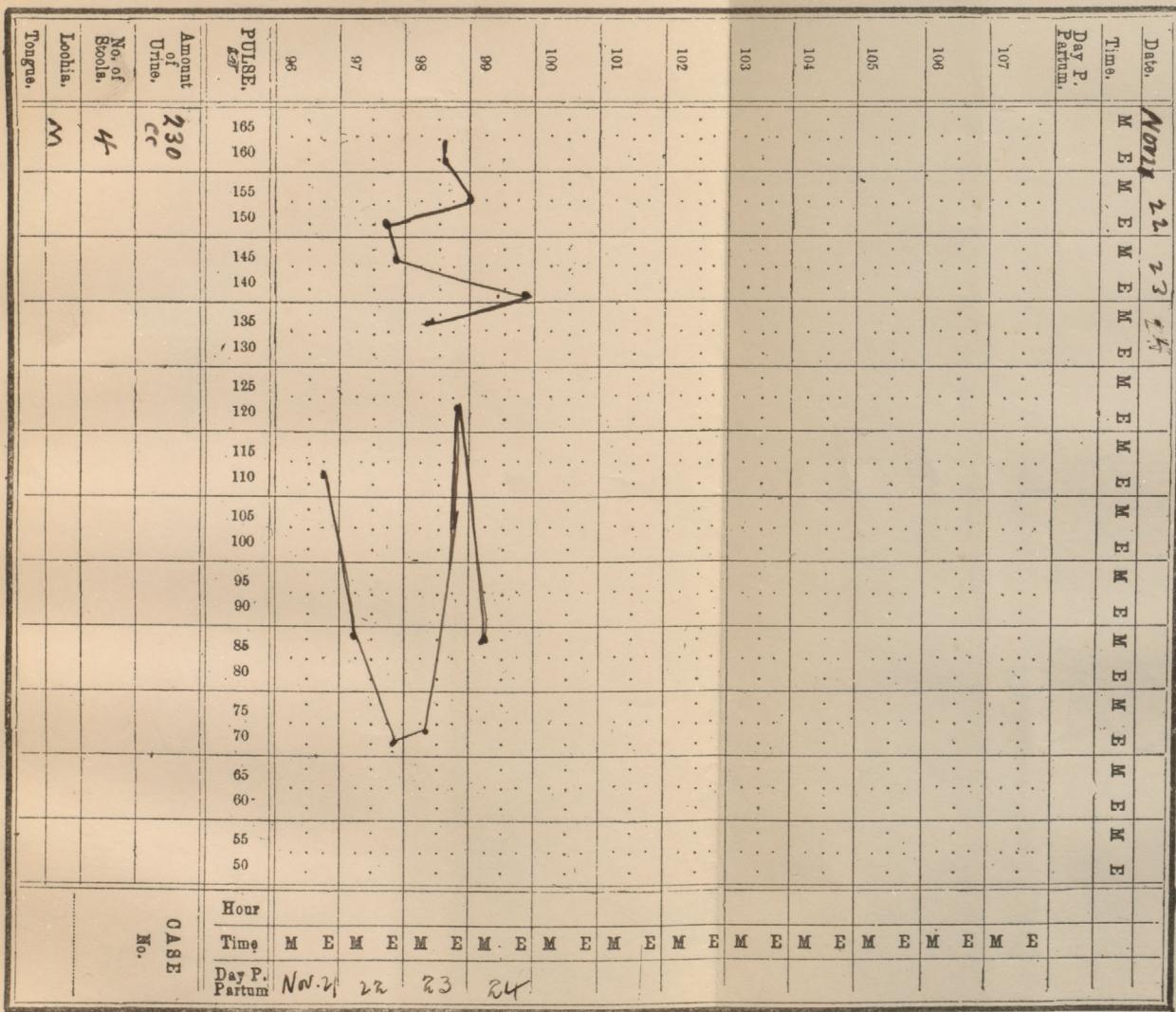
Breech delivered A.M.
P.M.

Arms.—Left A.M.
P.M.

Right A.M.
P.M.

Head A.M.
P.M.

REMARKS. 1st Stage Eclampsia & Fis-



Abbreviations.—F. Free. M. Moderate. S. Scanty. R. Red. Pk. Pink. Br. Brown. P. Pale. O. Offensive.

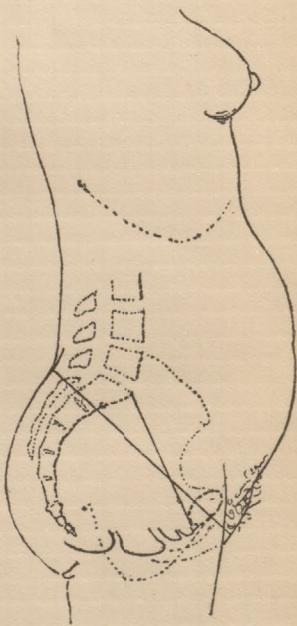
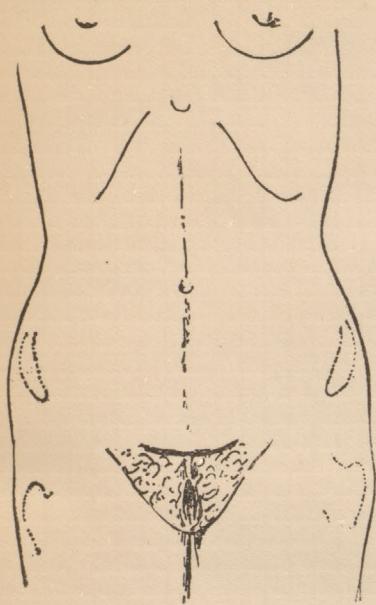
Prefix.—V. Very. Sl. Slightly.

For

Ver.

REM

CASE NO. 1.



CASE NO. 1

Mrs Pollock, act. ⁴⁰, residing at
421 Rechlin St. Cig.

CASE NO. 1.

CASE NO. 1.

PUEPERIUM.

DAY P.P.	FUNDUS.	LOCHIA.	BLADDER.	BREASTS.
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
13				
14				

Examination days p.p.; Sutures removed : Uterus involuted ;

Perineum ; Cervix ; Discharges

General Condition ; Treatment

Conselj Comitatu
Helpoje
Leyendas de qualesquier
lenguas

1. Lengua

Y Diáctica

2. Canto

Y Danza

3. Danza

Y Juego

4. Juego

Y Danza

5. Danza

Y Juego

6. Juego

Y Danza

7. Danza

Y Juego

8. Juego

Y Danza

9. Danza

Y Juego

10. Juego

Y Danza

11. Danza

Y Juego

12. Juego

Y Danza

13. Danza

Y Juego

14. Juego

Y Danza

15. Danza

Y Juego

16. Juego

Y Danza

17. Danza

Y Juego

18. Juego

Y Danza

19. Danza

Y Juego

20. Juego

Y Danza

21. Danza

Y Juego

22. Juego

Y Danza

23. Danza

Y Juego

24. Juego

Y Danza

25. Danza

Y Juego

26. Juego

Y Danza

27. Danza

Y Juego

28. Juego

Y Danza

29. Danza

Y Juego

30. Juego

Y Danza

31. Danza

Y Juego

32. Juego

Y Danza

33. Danza

Y Juego

34. Juego

Y Danza

35. Danza

Y Juego

36. Juego

Y Danza

37. Danza

Y Juego

38. Juego

Y Danza

39. Danza

Y Juego

40. Juego

Y Danza

41. Danza

Y Juego

42. Juego

Y Danza

43. Danza

Y Juego

44. Juego

Y Danza

45. Danza

Y Juego

46. Juego

Y Danza

47. Danza

Y Juego

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154. Juego

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157. Danza

Y Juego

158. Juego

Y Danza

159. Dan

Journal of
the
American
Academy
of
Arts
and
Sciences
Volume
XVII
1879

CASE NO. 2.

Name and Age *Miranda Raffenstein* Family History.....
 Occupation *Book* { S
 Admitted *Feb 21/07*
 Delivered *10.30 AM Feb 22/07* Duration of Preg.....
 Discharged.....

<i>Personal History—</i>	
Rickets	Syphilis.....
Scarlatina	Heart.....
Measles	Lungs.....
Diphtheria	Accident } or Injury }
Nephritis	

Phys. Exam.—Heart ; Lungs. ; Liver. ; Spleen.

Menstruation.—Began at *14* year; Interval *28* days; Duration *3* days; Pain *no*; { Before *Scanty*. During *Moderate*. After *Prefuse*.

Previous Pregnancies.—No *none*; Full term *none*; Premature *none*; { At what month Cause

Vomiting Headache Edema Other symptoms
 , , , ,

Previous Labours. { Normal Complications
 Complicated

Child { Born Alive Weight Abnormalities
 " Dead , ,

Treatment { Medicinal
 Operative

CASE NO. 2.—(Continued.)

Previous Puerperiums.—Fever..... Breasts..... Nursing.....

Complications {
and Treatment {

Last Menstruation Began.....; Ended May; Amount.....

Present Pregnancy.—Quickening Sept. ; Vomiting—From June 15 to Aug. 1st

Headache None; Oedema of feet during last month; Albuminuria (Constipation)

Other Symptoms and Treatment:	Constipation
	Diarrhoea.....
	Hemorrhoids.....
	Vaginal Discharge <i>Keromosa</i>
	Tension.....

Examination.—Date Feb 24th 1861; Breasts large, firm, knots; Nipples watery, ^{slight} redness; Milk ^{white} & ^{thin} or ^{excessive}.

Abdomen.—Shape; Umbilicus; Fundus ~~at~~ (cm. in.) above S : F. H.

<i>Pelvis.</i>		<i>Perineum.</i>		<i>Vagina.</i>		<i>Cervix.</i>		<i>Urine in 24 hrs.</i>
Cr.....	cm. in.)	{ Intact.....		Size.....		{ Intact.....		Reaction <i>and</i>
Sp.....	(.... in.)	{ Repaired.....		Length.....		{ Repaired.....		Sp. gr. <i>1028</i>
Conj. Ext.	(.... in.)	{ Long.....		Secretion.....		{ Long.....		Album. <i>X</i>
Conj. Diag.	(.... in.)	{ Short.....				{ Short.....		Sugar <i>0</i>
Conj. Ver.	(.... in.)	{ Rigid.....				{ Ext. Os.		Casts <i>Hyaline</i>
B.I.	(.... in.)	{ Dilatable.....				{ Int. Os.		U.

Remarks..... *Int. Cr.* *Urea*
Secretion *Total Solids*

LABOUR.

Labour began	<i>Entered Hospital in 2nd Labour</i>	A.M. P.M.	7/6 21	19 07	Temp. 99 F. (C.); Pulse 90; Resp
1st Stage ended	10. 15	A.M. P.M.	7/6 22	19 07	at 12 noon
2nd Stage ended	11. 30	A.M. P.M.	.. .	19 ..	Memb. Rupt. { Spont. 10. 15 A.M. Artificial P.M. 7/6 22 19 07
3rd Stage ended	11. 50	A.M. P.M.	.. .	19 ..	Placenta Expelled 11. A.M.
Hours in Labour.	1st. 26?	2nd. 11. 15	3rd. 20 min	Total. 27. 50	{ Spont. { Easy. Artif. { Difficult.

1ST STAGE.—Pres. Head; Position L.O.A.; Pains Indefinite; F.H. Head { Above
Breech { In Brim.
Below

Cervix { Rigid
Dilatable Vagina

Treat.....

2ND STAGE.—Pres. Head; Position L.O.A.; Pains Strong, F.H. Head { Above
Breech { In Brim.
Below

Mechanism Attitude
Posture ,

Chlorof. { Obstet. degree { Continuously From 10. 30
Ether / Surgical " { Intermittently By during expulsion To 11. 20
A.M. Total 1h
A.M. A.M.

Treat.....

LABOUR.—(Continued.)

3RD STAGE.

Placenta.—Pres. Maternal Surface; Complete Incomplete Weight Gm. (..... oz.)

Membranes.—Complete Condition Incompl. Incomplete

Cord.—Length cm. (..... in.); Insertion

Around { Neck 3 times { Tight Treat. Clamped and Cut - shoulder Rotates
Body Loose }

Perineum.—Ruptured } Cause ; Sutures { Vag. / Perin. / Kind P. N.C.
Unruptured }

Hemorrhage, { Slight When cord when plac. ; How controlled
Moderate When was born
Severe Weighed, } Amount Estimated Amount 550 CC.

Douche { Vagin. Why? Kind Mother's condition hrs. P.P.
Uterin. Why? Amount Temp. Pulse Resp.

Temp. Fundus U. during interval

Treat. Carbolized at
end of IV stage

Ergot 3 gr. at end of III stage

OPERATION.

Forceps.—Kind Operation { High,
Medium, { Easy,
Low, { Difficult,

Indication.....

Position of patient. { Dorsal.
Lateral.

Lower Blade A.M. Locked

Upper " A.M. Removed P.M. { Before delivery,
P.M. { After

Traction ; Compression

Version.—Kind

Indication.....

Position of patient.....

Began A.M. { Easy

Ended P.M. { Difficult

Delivery A.M. { Spontaneous

P.M. { Artificial

Breech.—Diagnosis by { Int. Exam.
Ext. "

Position

Position during extraction { Dorsal.
Lateral.

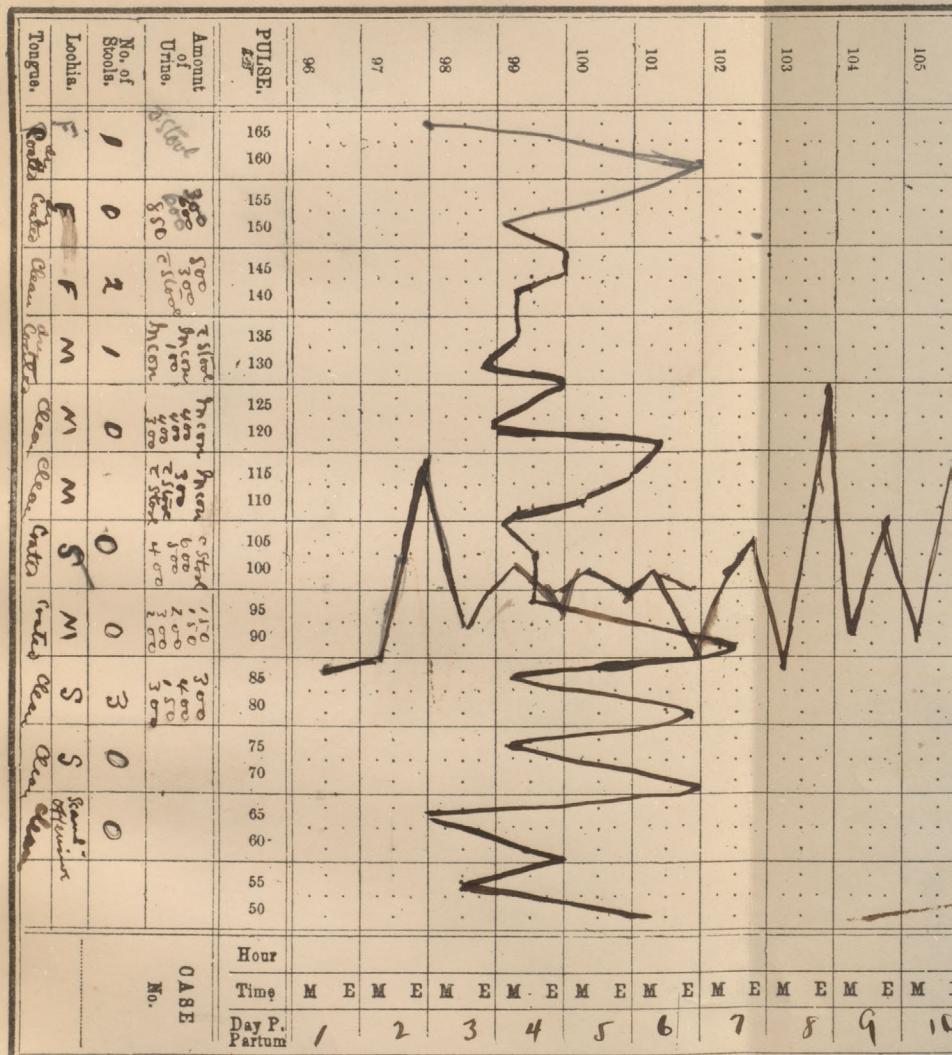
Breech delivered A.M. P.M.

Arms.—Left A.M.
P.M.

Right A.M.
P.M.

Head A.M.
P.M.

REMARKS.....

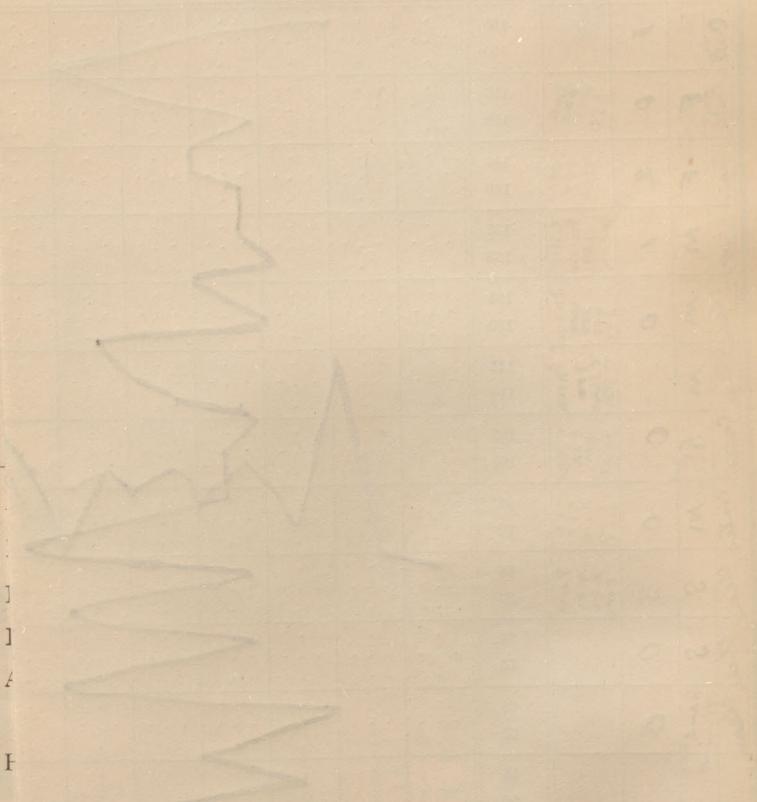


Abbreviations.—F. Free. M. Moderate. S. Scanty. R. Red. Pk. Pink. Br. Brown. P.

Prefix.—**V.** Very. **Sl.** Slightly.

Fc

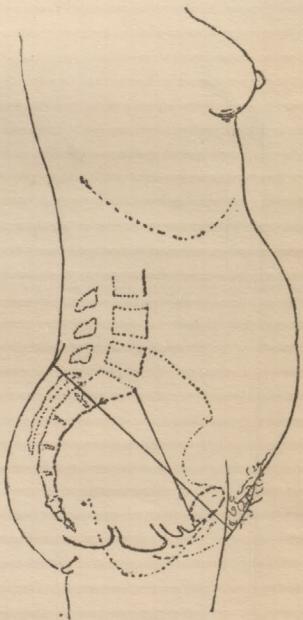
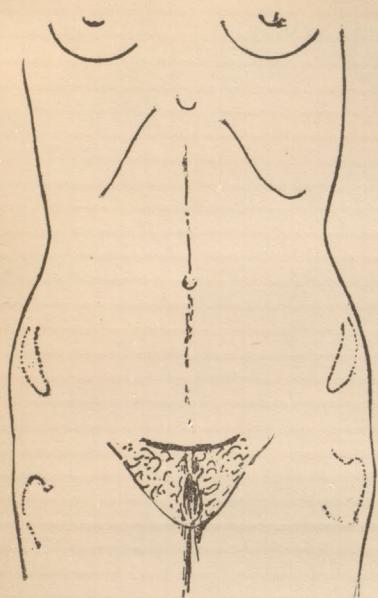
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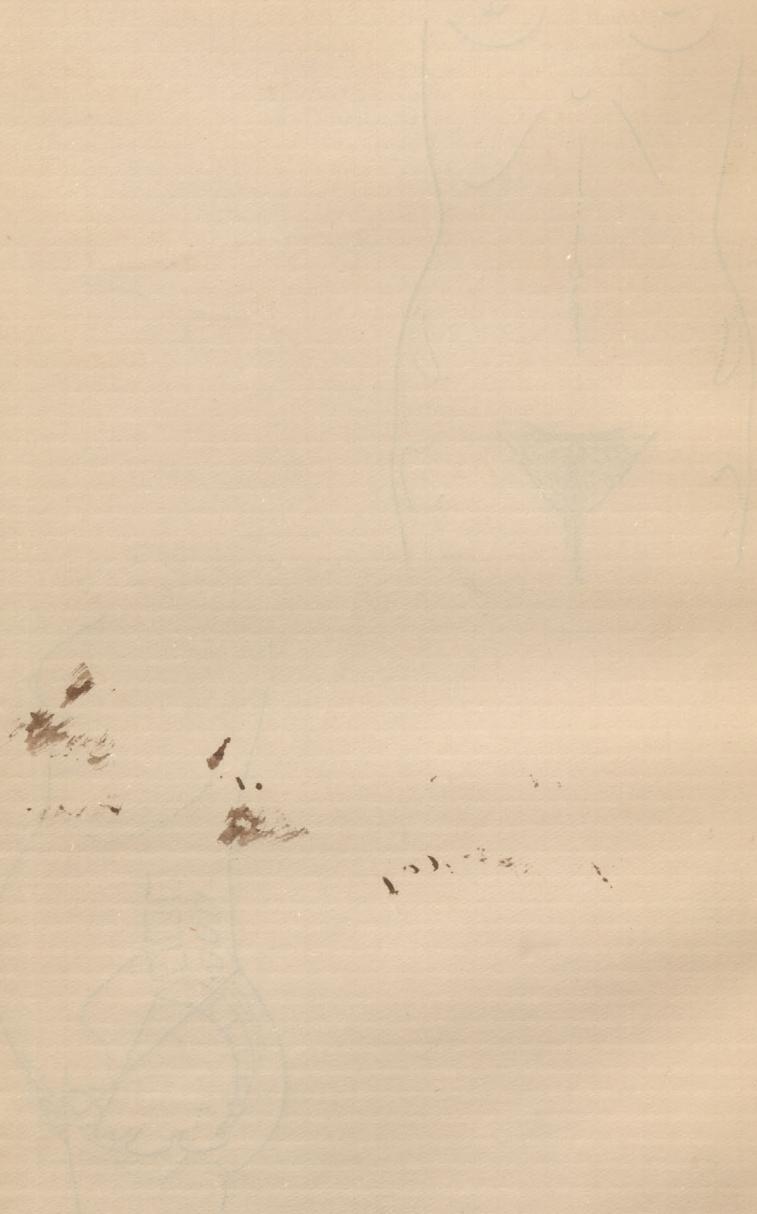
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REMA

CASE NO. 2.



CASE NO. 2.



CASE NO. 2.

Diary

Feb. 22 - Child Born at 10.³⁰ AM. Had a comfortable day. sleep well during the night. Pulse was elevated slightly. Vomited.

Feb. 24 Good day. Coughed Considerable slight. The following ^{Verb} adjective

" 25 Complained sore throat. Coughed Considerable. Given Dr. Remm 3*i*

" 26 Having gas for 2nd day. slept well

" 27 Pile Cath. - No Complaints.

" 28 Good day. sleep well.

Mar 2 A bad night. Complains phlegm after the A.M. and abdominal pain in p.m. - slight tenderness

" 3 No Complaints - Sutures removed up in p.m.

" 4 A poor night. Vomited in Early part. perspired freely

" 5 Hot douche 3.12 Egg oil 1.0 m 24d up all day. No Complaints

" 6 No Complaints. slept well.

CASE NO. 2.

PUERPERIUM.

DAY P.P.	FUNDUS.	LOCHIA.	BLADDER.	BREASTS.	
Feb 22 1	Firm	Profuse	urine & stool 300 + 600	secretion OK	Had Comfortable day
Feb 23 2	"	"	500 + 300 + 2 stool		Pulse accelerated
" 24 3	"	"	500 + 300 + 2 stool		Had a good night
" 25 4	"	Moderate	500 + 300 + 2 stool	secretion OK	Had Slight Incontinence
" 26 5	"	"	500 + 300 + 2 stool		Coughed a great deal
" 27 6	"	"	500 + 300 + 2 stool		during the day. No
" 28 7	"	"	500 + 300 + 2 stool twice	Normal	one short.
Mar 1 8	"	"	500 + 300 + 2 stool twice	"	
" 2 9	"	"	OK	"	
" 3 10	"	"	"	"	
" 4 11	"	"	"	"	
" 5 12	✓	✓	✓	✓	
" 6 13					
" 7 14					

Examination 10 days p.p.; Sutures removed on Mar 3 (10 AM) Uterus in good position involuted;
 Perineum well healed; Cervix ; Discharges Moderate in amount (red discharge)
 General Condition ; Treatment

Geological Survey
Bibliography
Supplement

CASE NO. 3.

Name and Age Mary Barker 19
 Occupation House worker { M.
 Admitted Feb 24/07
 Delivered Feb 24/07 Duration of Preg.
 Discharged Mar 8/07

Family History				
Personal History—	Rickets	—	Syphilis	—
	Scarlatina	—	Heart	—
	Measles	+	Lungs	—
	Diphtheria	+	Accident or Injury	{ —
	Nephritis	—		

Phys. Exam.—Heart ✓ ; Lungs ✓ ; Liver ✓ ; Spleen ✓

Menstruation.—Began at 15 year; Interval 30 days; Duration 5 days; Pain No; { Before ; During ; After , { Scanty. Moderate. Profuse. ✓

No Previous Pregnancies.—No ; Full term ; Premature ; { At what month ; Cause
 Vomiting Headache Edema Other symptoms
 , , , , ,

No Previous Labours { Normal , Complications
 Child { Born Alive Weight , Abnormalities
 " Dead ,
 Treatment { Medicinal
 Operative

CASE NO. 3.—(Continued.)

No. Previous Puerperiums.—Fever Breasts Nursing

Complications {
and Treatment }

Last Menstruation Began — ; Ended — ; Amount

Present Pregnancy.—Quickening ; Vomiting—From None to { Slight.
Moderate.
Severe.

Headache Slight ; Edema None ; Albuminuria

Constipation ; Diarrhea ; Hemorrhoids ; Vaginal Discharge ; Tension ;

Other Symptoms and Treatment : No Signs of Inflammation

Examination.—Date Feb 24 ; Breasts Very full ; Nipples Normal ; Milk +

Abdomen.—Shape Ovoid ; Umbilicus Key ; Fundus (cm. in.) above S ; F. H.

Pelvis.—	Perineum.—	Vagina.—	Cervix.—	Urine in 24 hrs.—
Cr. <u>27</u> cm. (.... in.)	{ Intact Repaired	Size Length Secretion	{ Intact Repaired Long Short Ext. Os. Int. Os. Secretion	Reaction Sp. gr. Album. Sugar Casts Urea Total Solids
Sp. <u>24.5</u> (.... in.)				
Conj. Ext. <u>20</u> (.... in.)	{ Long Short			
Conj. Diag. (.... in.)				
Conj. Ver. (.... in.)	{ Rigid Dilatable			
B. I. <u>10.5</u> (.... in.)				

Remarks Positive Arch records

LABOUR.

Labour began	9	A.M. P.M.	Feb 24 1907	Temp. 98 ⁴ F. (..... C.); Pulse 100 ; Resp 24 at 9.10
1st Stage ended		A.M. P.M.	19	
2nd Stage ended		A.M. P.M.	19	Memb. Rupt. { Spont. A.M. Artif. P.M. Apr 24 1907
3rd Stage ended		A.M. P.M.	19	Placenta Expelled 10.27 A.M. P.M.
Hours in Labour.	1st. 10 12	2nd. 1-2	3rd. 15	Total. 27

{ Spont. { Easy.
Artif. { Difficult.

1ST STAGE.—Pres. Vertex; Position R.O.A.; Pains Freq.; F.H. Head { Above
Breech { In Brim.
Below

Cervix { Rigid
Dilatable Vagina
Treat. Expectant.

2ND STAGE.—Pres. Vertex; Position R.O.P.; Pains Freq., F.H. Head { Above
Breech { In Brim.
Below

Mechanism Face to Pubo. Attitude
, Posture ,

Chlorof. { Obstet. degree { Continuously From
Ether. { Surgical " { Intermittingly By Nurse To
A.M. Total
P.M.
A.M.
P.M.

Treat.

LABOUR.—(Continued.)

3RD STAGE.

<i>Placenta.</i> —Pres.	<i>Maternal</i>	Complete	Weight.....	Gm. (.....oz.)
		Incomplete		
<i>Membranes.</i> —	Complete	Condition.....		
	Incomplete			
<i>Cord.</i> —Length.....	cm. (.....in.)	Insertion.....		
Around {	Neck	times { Tight		
	Body	{ Loose , Treat.....		
<i>Perineum.</i> —	Ruptured	Cause.....	Vag.	Kind.....
	Unruptured		Perin.	
			Rect.	
Hemorrhage,	{ Slight			
	Moderate	When.....	During labor & delivery	No special treat
	Severe			
			How controlled.....	
			Weighed,	oz.
Douche {	Vagin.		Estimated Amount.....	
	Uterin.	Why?		
Treat.....	Kind.....		Mother's condition	hrs. P.P.....
	Amount.....		Temp.....	Pulse.....
	Temp.....		Fundus.....	Resp.....
			U. during interval	✓

OPERATION.

<i>Forceps</i> .—Kind	Operation	$\left\{ \begin{array}{l} \text{High,} \\ \text{Medium,} \\ \text{Low,} \end{array} \right\}$	$\left\{ \begin{array}{l} \text{Easy,} \\ \text{Difficult,} \end{array} \right\}$
Indication	<i>House</i>		
Position of patient. {	Dorsal. Lateral.		
Lower Blade	A.M. P.M.	Locked	
Upper "	A.M. P.M.	Removed	A.M. { Before P.M. } After delivery,
Traction		; Compression	

<i>Version</i> .—Kind			
Indication			
Position of patient			
Began	A.M. P.M.	{ Easy	
Ended	A.M. P.M.	{ Difficult	
Delivery	A.M. P.M.	{ Spontaneous	
		{ Artificial	

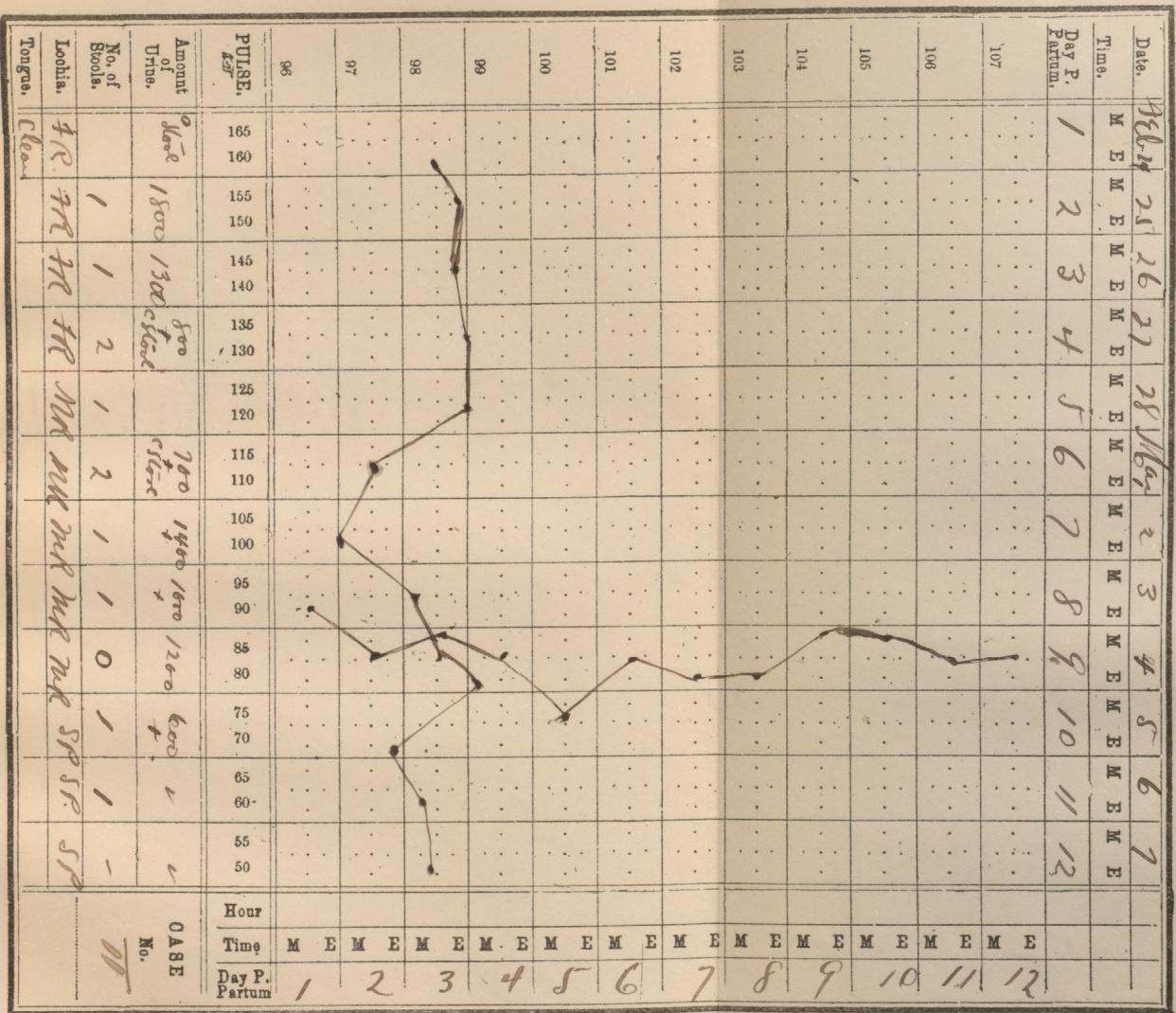
Breech.—Diagnosis by { Int. Exam.
Ext. "

Position		
Position during extraction {	Dorsal. Lateral.	
Breech delivered		A.M. P.M.
Arms.—Left		A.M. P.M.
Right		A.M. P.M.

Head

A.M.
P.M.

REMARKS.....



Abbreviations.—F. Free. M. Moderate. S. Scanty. R. Red. Pk. Pink. Br. Brown. P. Pale. O. Offensive.

Prefix.—V. Very. Sl. Slightly.

Force

]

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Vers

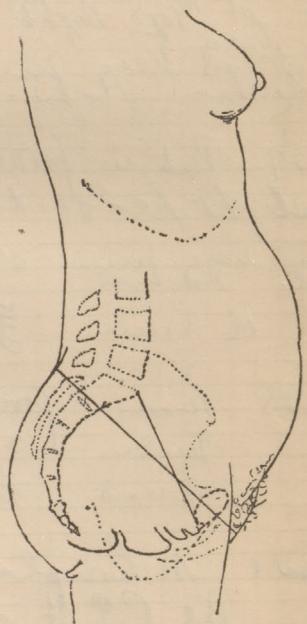
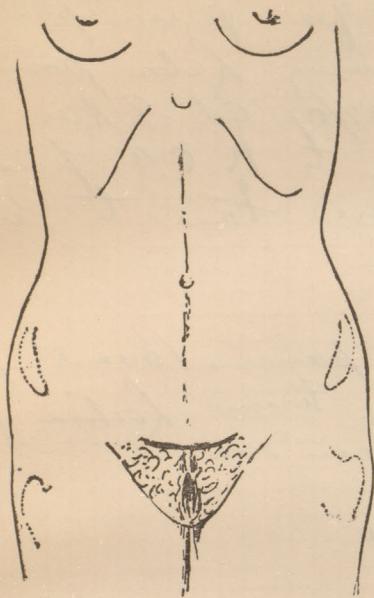
REM

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CASE NO. 3.



CASE NO. 3.

① Feb 24/07

Married 6 years. Aet 19 yrs. Green para
 full term pregnancy labr pains
 commenced Feb 24/07 at 9 AM.
 L.D.A. later turned to R.D.A. finally
 R.O.P. and delivered same to Pubis
 Spontaneous

② Feb 25/07 Fair Night - pain. Breast full
 and Normal. Fundus firm. Lochia profuse
 No stool till 3 P.M. Fundus
 Regt 3 ss
 Physchuria Jr 1/30

③ Feb. 26/07 Good Night. No Complaints. Child put
 to bed. Breast very full. Deciduous teeth loose
 Lochia profuse red.

④ Feb 27. Patient in good condition complains of a
 slight headache this am.
 T. 98.6 F. 96.4 P. 80 R. 24 Respiration
 20. Very firm 3" above symphysis
 of Rium 3; 2 Stools

⑤ Feb 28 Passed a good night
 Tenders - 2 1/2" above symphysis
 Breast - OK.

⑥ Mar 1 No complaint for night and day
 Pill C & H # 111
 of Rium - 3;"

CASE NO. 3.

- (7) Mar 1/ Pat. in good Condition
 Tenderness -
 Lorhia Mod. Red. - 1 stool
- (8) " 3 Tenderness, firm
 L. - Scanty pale.
 B. - Normal.
 1 stool. Pel Cattlo. ^{C 1 H} III
 " old Recenzi ["] ^{3/4}
- (9) " 4 No complaint
 Tenderness, firm
 L. - Scanty pale
 B. - Normal. 0 stool
- (10) " 5 No Complaint
 P. firm
 L. Scanty - pale.
 B. Normal.
 Uterus were invol. Tenderness forward
 1/4" B. above pubis. Soft. Slight tenderness
 cervix long left. External layer above
 C 1 H
 Hot douche bid
 old Recenzi ^{3/4}
 Egot. Mar 18 & 4th.
 1 stool
- (11) " 6 Pat. doing well.
 Stool. douche BID
 old Recenzi ^{3/4}
 Egot. Mar 18 & 4th.
- (12) - 8 Slight Red discharge
 outlet in vagina, good Condition
 Mucous ten. per Colonizing left side
 cervix. Slight laceration on left side
 No elevation. Uterus were involuted
 well forward. appendages not tender

6
CASE NO. 3.

Bread and Nipples in good condition
Genl Conv. good

Wide bridle for 2 days.

② Labour

Notes on Stage I

6
Delivery hasten up Canal dilated: Ruptured Membrane Head descends - bent posteriorly
Pains Infreq. Not very strong
Small amt. of liquor amniotic

③ Stage II

Pains stronger and more frequent, with foot advancing head came down face to pub. The head flexing under pressure on glabella Caput on left but Cords not about neck

④

61

PUERPERIUM.

DAY P.P.	FUNDUS.	LOCHIA.	BLADDER.	BREASTS.
1	firm	Profuse	Normal	Steady
2	"	"	"	firm steady
3	"	"	"	Scouring
4	"	Moderate	"	firm
5	"	"	"	OK.
6	"	"	"	Normal
7	"	"	"	Normal
8	"	Pearly	"	Normal
9	"	"	"	-
10	"	"	"	-
11	"	"	"	-
12	"	"	"	-
13	"	"	"	-
14	"	"	"	-

Examination 10 days p.p.; Sutures removed : Uterus Well involved;

Perineum ; Cervix long. ~~long.~~ Discharges Normal

General Condition Very good ; Treatment H.S. Douche 18.10.

Ergot. XV min
6l Recum

g 4 h.
8d

LAURENCE D. COLE

Board of Directors

1997-1998

W. H. B. S. R. S. S. S. S. S. S.

Octagon Corporation - Octagon
Building - Octagon Building - Octagon

Octagon Corporation - Octagon
Building - Octagon Building - Octagon

CASE NO. 4.

Name and Age *Jennie Nelson age 21* Family History.....
 Occupation..... { M.
 Admitted..... S
 Delivered..... Duration of Preg.....
 Discharged.....

<i>Jennie Nelson birth</i>		Personal History—
Rickets	<i>no</i>	Syphilis.....
Scarlatina	<i>yes</i>	Heart.....
Measles	<i>in childhood</i>	Lungs.....
Diphtheria	<i>no</i>	Accident or Injury {
Nephritis		

Phys. Exam.—Heart.....; Lungs.....; Liver.....; Spleen.....

Menstruation.—Began at *16* year; Interval *28* days; Duration *7* days; Pain *none*; { Before.....; During.....; After.....; { Scanty. Moderate. Profuse.

Previous Pregnancies.—No *1*; Full term *1*; Premature *0*; { At what month.....; Cause.....

Vomiting *Persistent*. Headache....., Edema....., Other symptoms.....
 , , ,
 , , ,

Previous Labours..... { Normal....., Complications..... *None*,
 { Complicated.....,

Child { Born Alive....., Weight....., Abnormalities.....
 " Dead....., ,

Treatment { Medicinal.....,
 { Operative.....

CASE NO. 4.—(Continued.)

Previous Puerperiums.—Fever , Breasts , Nursing

Complications and Treatment {

Last Menstruation Began June 17 ; Ended ; Amount

Present Pregnancy.—Quickening Oct ; Vomiting—From None to { Slight.
Severe.

Headache None ; Cœdema of feet & legs, Albuminuria

Other Symptoms and Treatment : { Constipation Bowel Regular Difficult in inclusion
Diarrhoea
Hemorrhoids
Vaginal Discharge a very - Proper (less copious) What was
Tension
Date Dec 20/16 ; Breasts soft No swell Nipples Ingot Cris Milk
Abdomen.—Shape flat ; Umbilicus ; Fundus 13.5 cm. (cm. in.) above S ; F. H.

Pelvis.—	Perineum.—	Vagina.—	Cervix.—	Urine in 24 hrs.—
Cr. 29 cm. (in.)	{ Intact	Size	{ Intact	Reaction
Sp. 27 (in.)	{ Repaired	Length	{ Repaired	Sp. gr.
Conj. Ext. 20 (in.)	{ Long	Secretion	{ Long	Album.
Conj. Diag. 11.25 in.)	{ Short	.....	{ Short	Sugar
Conj. Ver. (in.)	{ Rigid	.....	{ Ext. Os.	Casts
B.I. (in.)	{ Dilatable	.....	{ Int. Os.	Urea
		.....	Secretion	Total Solids

Remarks Dec 20 Pres. and Pro. of Foster Loa.
Feb 17 - Loa. } By 1st Exam

Relation - at Biinn on both above date
7 Bus. Day

LABOUR.

Labour began	<u>12</u>	A.M.	<u>Mar 8</u>	19 <u>07</u>	Temp..... F. (..... C.); Pulse..... ; Resp.....
1st Stage ended		A.M.		19.....	at.....
2nd Stage ended		A.M.		19.....	
3rd Stage ended		A.M.		19.....	
		P.M.			Memb. Rupt. { Spont. <u>4.03</u> A.M. Artif. P.M. 19.....
		P.M.			Placenta Expelled <u>4.48</u> P.M.
Hours in Labour.	1st.	2nd.	3rd.	Total <u>8</u>	{ Spont. { Easy. Artif. { Difficult.

1ST STAGE.—Pres. Vertebral; Position L. OP; Pains weak at long duration by flaccid, F. H. 76. Head Above
In
Below Breech Brim.

Cervix { Rigid
Dilatable Vagina

Treat.

2ND STAGE.—Pres. Rectus; Position Lop.; Pains fry aching, F.H. 156 Head { Above
Breech { In Brim.
Below

Mechanism Normal Attitude Flexion

Treat.

LABOUR.—(Continued.)

3RD STAGE.

Placenta.—Pres. Marginal; Complete _____; Incomplete _____ Gm. (..... oz.)

Membranes.—Complete _____; Incomplete _____ Condition OK.

Cord.—Length cm. (..... in.); Insertion

not Around { Neck times { Tight
Body Loose , Treat.....

Perineum.—Ruptured } Cause Bad shoulder, Sutures { Vag.
Unruptured } and old tear Perin. Rect. Kind P.W.L.

Hemorrhage, { Slight When III stage ; How controlled 600cc
Moderate Weighed, oz.
Severe Estimated Amount oz.

Douche { Vagin. Why? Kind | Mother's condition OK hrs. P.P. 1
Uterin. Amount | Temp. 97 Pulse 78 Resp.
Temp. Fundus Firm

Treat. 3 i. Ergot at end of U. during interval

III stage

OPERATION.

Forceps.—Kind..... Operation { High,
Indication..... Medium, { Easy,
Low, { Difficult,

Position of patient. { Dorsal.
Lower Blade..... P.M. Locked.....
Upper "..... A.M. Removed P.M. { Before delivery,
Traction..... ; Compression..... After

Version.—Kind.....
Indication.....
Position of patient.....
Began..... A.M. { Easy
Ended..... A.M. { Difficult
Delivery..... A.M. { Spontaneous
P.M. { Artificial

Breech.—Diagnosis by { Int. Exam.
Position

Position during extraction { Dorsal.
Breech delivered..... A.M.
P.M.

Arms.—Left..... A.M.
P.M.
Right..... A.M.
P.M.

Head..... A.M.
P.M.

REMARKS.....
.....
.....

Abbreviations.—E. Free. M. Moderate. S. Scanty. R. Red. Pk. Pink. Br. Brown. P. Pale. O. Offensive.

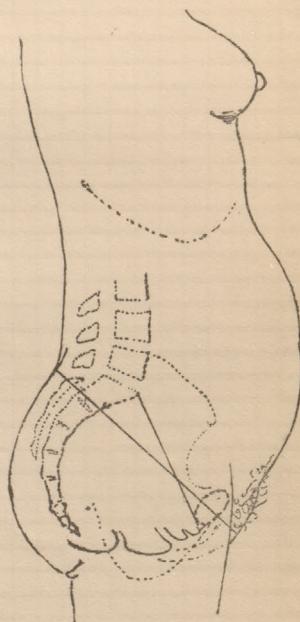
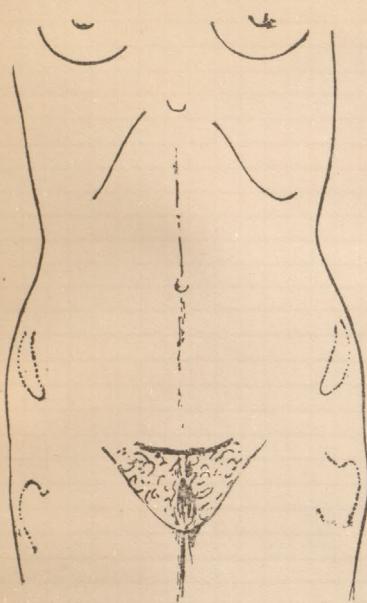
Prefix.—**V.** Very. **Sl.** Slightly.

For

Ver.

REMA

CASE NO. 4.



CASE NO. 4.

CASE NO. 4.

CASE NO. 4.

PUERPERIUM.

DAY P.P.	FUNDUS.	LOCHIA.	BLADDER.	BREASTS.	
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					

Examination days p.p.; Sutures removed : Uterus involuted ;

Perineum ; Cervix ; Discharges

General Condition ; Treatment

CASE No. 5.

Name and Age.....		Family History.....	
Occupation.....	{ M. S	Personal History—	
Admitted.....		Rickets.....	Syphilis.....
Delivered	Duration of Preg.....	Scarlatina.....	Heart.....
Discharged.....		Measles.....	Lungs.....
		Diphtheria.....	Accident } or Injury }
		Nephritis.....	

Phys. Exam.—Heart.....; Lungs.....; Liver.....; Spleen.....

Menstruation.—Began at.....year; Interval.....days; Duration.....days; Pain.....; { Before.....; During.....; After.....; { Scanty.
Moderate.
Profuse.

Previous Pregnancies.—No.....; Full term.....; Premature.....; { At what month.....
Cause.....

Vomiting.....; Headache.....; Oedema.....; Other symptoms.....
,

Previous Labours......; { Normal....., Complications.....
Complicated.....,

Child { Born Alive....., Weight....., Abnormalities.....
“ Dead.....,

Treatment { Medicinal.....
Operative.....

CASE NO. 5.—(Continued.)

Previous Puerperiums.—Fever ; Breasts ; Nursing

Complications {
and Treatment }

Last Menstruation Began ; Ended ; Amount

Present Pregnancy.—Quickening ; Vomiting—From to { Slight.
Moderate.
Severe.

Headache ; Oedema ; Albuminuria

Other Symptoms and Treatment:	{ Constipation
	Diarrhea.....
	Hemorrhoids.....
	Vaginal Discharge.....
	Tension.....

Examination.—Date ; Breasts ; Nipples ; Milk

Abdomen.—Shape ; Umbilicus ; Fundus (cm. in.) above S ; F. H.

Pelvis.—		Perineum.—	Vagina.—	Cervix.—	Urine in 24 hrs.—
Cr.	cm. (.... in.)	{ Intact	Size	{ Intact	Reaction
Sp.	(.... in.)	{ Repaired	Length	{ Repaired	Sp. gr.
Conj. Ext.	(.... in.)	{ Long	Secretion	{ Long	Album.
Conj. Diag.	(.... in.)	{ Short		{ Short	Sugar
Conj. Ver.	(.... in.)	{ Rigid		{ Ext. Os.	Casts
B.I.	(.... in.)	{ Dilatable		{ Int. Os.	Urea
				Secretion	Total Solids

Remarks.....

LABOUR.

Labour began	A.M.	19.....	Temp.....	F.(..... C.); Pulse..... ; Resp.....
1st Stage ended	A.M.	19.....		at
	P.M.			
2nd Stage ended	A.M.	19.....	Memb. Rupt. { Spont..... A.M..... 19.....	P.M.....
	P.M.		{ Artif.....	
3rd Stage ended	A.M.	19.....	Placenta Expelled.....	A.M.....
	P.M.			P.M.....
	1st.	2nd.	3rd.	Total.
Hours in Labour.....				

1ST STAGE.—Pres..... ; Position ; Pains..... ; F.H..... Head { Above
Breech { In Brim.
Below

Cervix { Rigid
Dilatable Vagina.....

Treat.....

2ND STAGE.—Pres..... ; Position ; Pains , F.H..... Head { Above
Breech { In Brim.
Below

Mechanism..... Attitude.....
....., Posture.....,

Chlorof. { Obstet. degree { Continuously By..... From..... A.M.
Ether. { Surgical " { Intermittingly To..... P.M. Total.....
A.M. P.M.

Treat.....

LABOUR.—(*Continued.*)

3RD STAGE.

<i>Placenta.</i> —Pres.	;	Complete Incomplete,	Weight.....	Gm. (.....oz.)
<i>Membranes.</i> —Complete Incomplete ,	;	Condition.....		
<i>Cord.</i> —Length.....	cm. (.....in.)	;	Insertion.....	
Around { Neck Body	times	{ Tight Loose ,	Treat.....	
<i>Perineum.</i> —Ruptured Unruptured	{	Cause.....	;	Sutures { Vag. Perin..... Kind..... Rect.....
Hemorrhage, { Slight Moderate, Severe	;	When.....	;	How controlled.....
			Weighted, Estimated	{ Amount..... oz.
Douche { Vagin. Uterin.	;	Why ? :.....	Kind.....	Mother's condition hrs. P.P.
			Amount.....	Temp. Pulse Resp.
			Temp.	Fundus.....
Treat.....				U. during interval.....

OPERATION.

Forceps.—Kind..... Operation { High,
Medium, { Easy,
Low, { Difficult,

Indication.....

Position of patient. { Dorsal.
Lateral.

Lower Blade..... A.M. Locked.....

Upper "..... P.M. Removed A.M. { Before delivery,
P.M. { After

Traction..... ; Compression.....

Version.—Kind.....

Indication.....

Position of patient.....

Began..... A.M. { Easy

Ended..... P.M. { Difficult

Delivery..... A.M. { Spontaneous

P.M. { Artificial

Breech.—Diagnosis by { Int. Exam.
Ext. "

Position.....

Position during extraction { Dorsal.
Lateral.

Breech delivered..... A.M.
P.M.

Arms.—Left..... A.M.
P.M.

Right..... A.M.
P.M.

Head..... A.M.
P.M.

REMARKS.....

Abbreviations.—F. Free. M. Moderate. S. Scanty. R. Red. Pk. Pink. Br. Brown. P. Pale. O. Offensive.

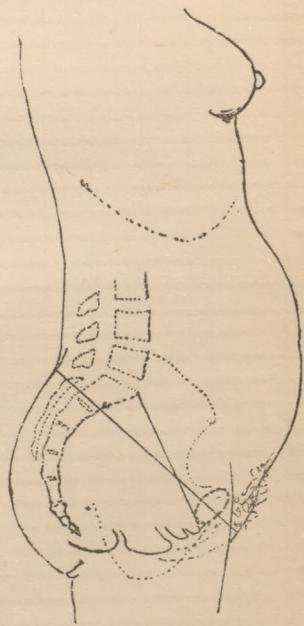
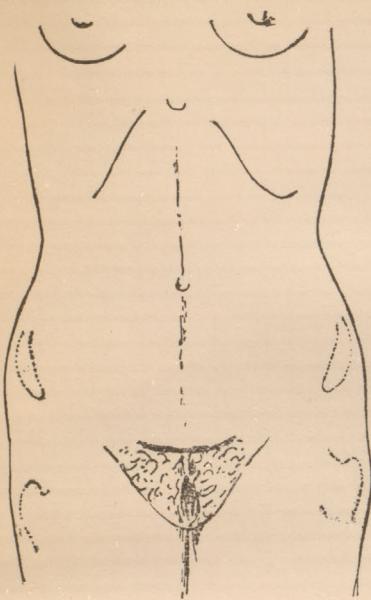
Prefix.—V. Very. Sl. Slightly.

Foi

Vé

Ri

CASE NO. 5.



CASE NO. 5.

CASE NO. 5.

CASE NO. 5.

PUERPERIUM.

DAY P.P.	FUNDUS.	LOCHIA.	BLADDER.	BREASTS.	
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					

Examination days p.p.; Sutures removed : Uterus involuted;

Perineum ; Cervix ; Discharges

General Condition ; Treatment

CASE NO. E

Licensee's Name	John W. Smith	Address	123 Main Street	City	Waukesha	State	Wisconsin
Child's Name	John W. Smith	Age	10	Relationship	Parent	Occupation	Businessman
Witness's Name	John W. Smith	Address	123 Main Street	City	Waukesha	State	Wisconsin
Date of Birth	1950	Sex	Male	Relationship	Parent	Occupation	Businessman
Signature	John W. Smith	Date	1980	Signature	John W. Smith	Date	1980

CASE NO. 6.

Name and Age.....	{ M. S.	Family History.....
Occupation.....		Personal History—
Admitted.....	Rickets..... Scarlatina..... Measles..... Diphtheria..... Nephritis.....	Syphilis..... Heart..... Lungs..... Accident or Injury }
Delivered.....	Duration of Preg.....	
Discharged.....		
<i>Phys. Exam.</i> —Heart.....; Lungs.....; Liver.....; Spleen.....		

Menstruation.—Began at.....year; Interval.....days; Duration.....days; Pain.....; { Before.....; During.....; After.....; } { Scanty. Moderate. Profuse. }

Previous Pregnancies.—No.....; Full term.....; Premature.....; { At what month.....
Cause.....}

Vomiting.....	Headache.....	Œdema.....	Other symptoms.....
,	,	,	,
.....			

Previous Labours......; { Normal....., Complications.....
Complicated....., }

Child { Born Alive....., Weight....., Abnormalities..... “ Dead.....,
--

Treatment { Medicinal..... Operative.....
--

CASE NO. 6.—(Continued.)

<i>Previous Puerperiums.</i> —Fever.....	Breasts.....	Nursing.....		
Complications { and Treatment }				
<i>Last Menstruation</i> Began.....	; Ended.....	; Amount.....		
<i>Present Pregnancy.</i> —Quickening.....	; Vomiting—From..... to.....	{ Slight. Moderate. Severe.		
Headache.....	; Oedema.....	; Albuminuria.....		
Other Symptoms and Treatment : { Constipation..... Diarrhoea..... Hemorrhoids..... Vaginal Discharge..... Tension.....				
<i>Examination.</i> —Date.....	; Breasts.....	; Nipples.....	; Milk.....	
<i>Abdomen.</i> —Shape.....	; Umbilicus.....	; Fundus.....	(cm. in.) above S ; F. H.	
<i>Pelvis.</i> — Cr. cm. in.)	<i>Perineum.</i> — { Intact..... Repaired.....	<i>Vagina.</i> — Size.....	<i>Cervix.</i> — { Intact..... Repaired.....	<i>Urine in 24 hrs.</i> — Reaction.....
Sp. (.... in.)	{ Long..... Short.....	Length.....	{ Long..... Short.....	Sp. gr.
Conj. Ext. (.... in.)	{ Rigid..... Dilatable.....	Secretion.....	{ Ext. Os. Int. Os.	Album.
Conj. Diag. (.... in.)				Sugar.
Conj. Ver. (.... in.)				Casts.
B.I. (.... in.)				Urea.
<i>Remarks.</i>				Secretion.....
				Total Solids.....

LABOUR.

1ST STAGE.—Pres.; Position; Pains.....; F.H. Head { Above
Breech { In Brim.
Below

Cervix { Rigid Dilatable Vagina

Treat.....

2ND STAGE.—Pies....., Position.....; Pains....., F.H. Breech { In Brim.
Below

Mechanism Attitude
..... Posture

Treat.....

LABOUR.—(*Continued.*)

3RD STAGE.

<i>Placenta.</i> —Pres.	;	Complete	Weight	Gm. (	oz.)
		Incomplete,			
<i>Membranes.</i> —Complete	;	Condition			
		Incomplete,			
<i>Cord.</i> —Length	cm. (	in.)	Insertion		
Around { Neck	times { Tight	Treat.			
{ Body	{ Loose,				
<i>Perineum.</i> —Ruptured	;	Cause		Vag.	
Unruptured				Perin.	Kind
				Rect.	
<i>Hemorrhage.</i> { Slight					
{ Moderate	When		;	How controlled	
{ Severe				Weighed,	
				Estimated { Amount	oz.
<i>Douche</i> { Vagin.	Kind		Mother's condition	hrs. P.P.	
{ Uterin.			Temp.	Pulse	Resp.
	Amount		Fundus		
	Temp.		U. during interval		
Treat.					

OPERATION.

Forceps.—Kind Operation { High,
Indication Medium, { Easy,
Low, { Difficult,

Position of patient. { Dorsal.
Lower Blade A.M. Locked
Upper " P.M. Removed A.M. { Before delivery,
Traction P.M. { After compression

Version.—Kind
Indication
Position of patient
Began A.M. { Easy
Ended P.M. { Difficult
Delivery A.M. { Spontaneous
P.M. { Artificial

Breech.—Diagnosis by { Int. Exam.
Position Ext. "

Position during extraction { Dorsal.
Breech delivered A.M.
Arms.—Left P.M.
Right A.M.
Head P.M.

REMARKS.....

.....

.....

Date.	M	E	M	E	M	E	M	E	M	E	M	E	M	E	M	E
Time.																
Day P. Partum.																
107
106
105
104
103
102
101
100
99
98
97
96
PULSE. L.S.P.	Hour	M	E	M	E	M	E	M	E	M	E	M	E	M	E	M
Amount of Urine.	Time															
No. of Stools.	Day P. Partum															
Tongue.	CASE No.															

Abbreviations.—F. Free. M. Moderate. S. Scanty. R. Red. Pk. Pink. Br. Brown. P. Pale. O. Offensive.

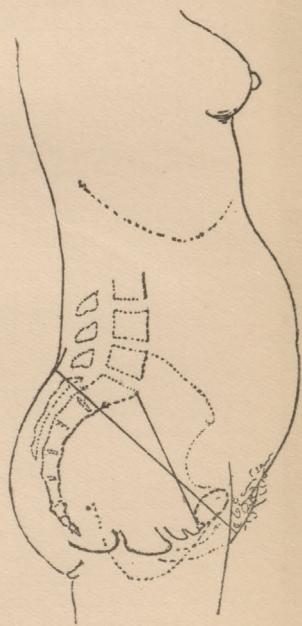
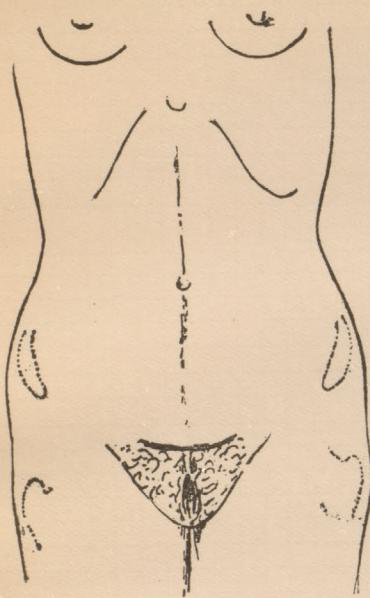
Prefix.—V. Very. Sl. Slightly.

Fo

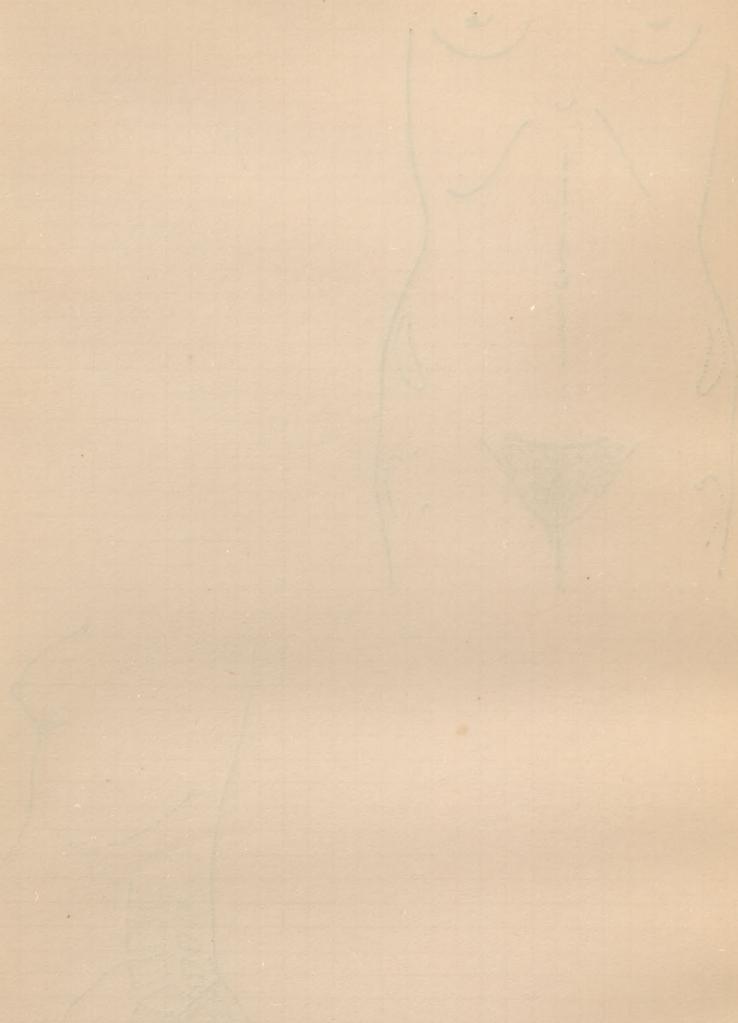
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RE

CASE NO. 6.



CASE NO. 6.



CASE NO. 6.

CASE NO. 6.

PUERPERIUM.

DAY P.P.	FUNDUS.	LOCHIA.	BLADDER.	BREASTS.	
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					

Examination days p.p.; Sutures removed : Uterus involuted ;

Perineum ; Cervix ; Discharges

General Condition ; Treatment

MEET OF THE STATE FAIR

BY ROBERT L. STANLEY

STANLEY

C S R D S A W O N E T H I C

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EXHIBITION
PARKING
CAMPING
FISHING
BOATING
WADING
SWIMMING
BATHING
WALKING
RUNNING
JOGGING
WALKING
SWIMMING
BOATING
FISHING
CAMPING
PARKING
EXHIBITION

PARKING
CAMPING
FISHING
BOATING
WADING
SWIMMING
BATHING
WALKING
RUNNING
JOGGING
WALKING
SWIMMING
BOATING
FISHING
CAMPING
PARKING
EXHIBITION

CASE NO. 6.

CASE NO. 6.

CASE NO. 6.

CASE NO. 6.

EXCELSIOR

Year	Month	Day	Page
1860	July	1	1
1860	July	2	2
1860	July	3	3
1860	July	4	4
1860	July	5	5
1860	July	6	6
1860	July	7	7
1860	July	8	8
1860	July	9	9
1860	July	10	10
1860	July	11	11
1860	July	12	12
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1860	July	24	24
1860	July	25	25
1860	July	26	26
1860	July	27	27
1860	July	28	28
1860	July	29	29
1860	July	30	30
1860	July	31	31

1860 July 1 - 31

HISTORY.

DATE.	RECTAL TEMP.		PULSE.		RESP.		MOTIONS.		URINE.	EYES.	CORD.	WEIGHT.
	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	Day	Night				
												.....gm (.....lb. .....oz)

Examination days after birth.

Eyes { Right ; Umbilicus ; Buttocks ; Genitals

{ Nursing

{ Feeding ; General condition

MEASUREMENTS.

DIAMETERS.

Occipito-frontal.....	cm. (..... in.)
" mental	" (..... in.)
Sub-occipito-bregmatic.....	" (..... in.)
Bi-parietal.....	" (..... in.)
Shoulders.....	" (..... in.)
Hips.....	" (..... in.)

CIRCUMFERENCES.

Occipito-frontal c.m. (..... in.)
 Occipito-mental " (..... in.)
 Sub-occipito-bregmatic " (..... in.)

Length of child cm. (..... in.)

GENERAL REMARKS.

CASE NO. 6.

RECORD OF CHILD.

..... Sex

Weight gm. Born A.M.
..... lbs. oz. P.M. 19....

Mother's Name and age

..... para. Health

Previous History

.....

Caput Succedaneum

Umbilical Cord

.....

Delivery

Duration hrs. mins.
..... :o:

NOTES AT TIME OF BIRTH.

Primary Respirations { Spont. } in min.
 { Artif. }

Cry

Circulation, Pulse

Injuries { Head,
 Face,
 Body

Tongue-tie, Eyes, Anus,

Umbilicus, Genitals

Temperature F. (..... C.)

Taken in rectum 5 mins. after birth.

Temperature 6 hrs after birth F. (..... C.)

CASE NO. 5.

CASE NO. 5.

CASE NO. 5.

CASE NO. 5.

HISTORY.

DATE.	RECTAL TEMP.		PULSE.		RESP.		MOTIONS.		URINE.	EYES.	CORD.	WEIGHT. .....gm (.....lb. .....oz)
	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	Day	Night				

Examination days after birth.

Eyes { Right ; Umbilicus ; Buttocks ; Genitals
Left ;

{ Nursing
Feeding ; General condition

MEASUREMENTS.

DIAMETERS.

Occipito-frontal.....	cm. (..... in)
“ mental.....	“ (..... in.)
Sub-occipito-bregmatic.....	“ (..... in.)
Bi-parietal.....	“ (..... in.)
Shoulders.....	“ (..... in.)
Hips.....	“ (..... in.)

CIRCUMFERENCES.

Occipito-frontal.....	c.m. (..... in.)
Occipito-mental.....	“ (..... in.)
Sub-occipito-bregmatic.....	“ (..... in.)

Length of child..... cm. (..... in.)

—:or—

GENERAL REMARKS.

CASE NO. 5.

RECORD OF CHILD.

Sex

Weight gm. lbs. oz. Born A.M. P.M. 19....

Mother's Name and age
..... para. Health

Previous History

Caput Succedaneum

Umbilical Cord

Delivery

Duration hrs. mins.
—:—

NOTES AT TIME OF BIRTH.

Primary Respiration { Spont. } in min.
Artif.

Cry

Circulation ; Pulse

Injuries { Head
Face
Body

Tongue-tie ; Eyes ; Anus ;

Umbilicus ; Genitals

Temperature F. (..... C.)
Taken in rectum 5 mins. after birth.

Temperature 6 hrs after birth F. (..... C.)

CASE NO. 4.

CASE NO. 4.

CASE NO. 4.

CASE NO. 4.

HISTORY.

DATE.	RECTAL TEMP.		PULSE.		RESP.		MOTIONS.		URINE.	EYES.	CORD.	WEIGHT.
	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	Day	Night				
												.....gm (.....lb. .....oz)

Examination days after birth.

Eyes { Right ; Umbilicus ; Buttocks ; Genitals

{ Nursing
Feeding ; General condition

MEASUREMENTS.

DIAMETERS.

Occipito-frontal.....	cm. (..... in)
" mental.....	" (..... in.)
Sub-occipito-bregmatic.....	" (..... in.)
Bi-parietal.....	" (..... in.)
Shoulders.....	" (..... in.)
Hips.....	" (..... in.)

CIRCUMFERENCES.

Occipito-frontal.....	c.m. (..... in.)
Occipito-mental.....	" (..... in.)
Sub-occipito-bregmatic.....	" (..... in.)

Length of child..... cm. (..... in.)

GENERAL REMARKS.

CASE NO. 4.

RECORD OF CHILD.

Sex

Weight gm. lbs. oz. Born A.M. P.M. 19

Mother's Name and age

para. Health

Previous History

Caput Succedaneum

Umbilical Cord

Delivery

Duration hrs. mins.

—:0:—

NOTES AT TIME OF BIRTH.

Primary Respirations { Spont. } in min.

Cry

Circulation ; Pulse

Injuries { Head
Face
Body

Tongue-tie ; Eyes ; Anus ;

Umbilicus ; Genitals

Temperature F. (..... C)

Taken in rectum 5 mins. after birth.

Temperature 6 hrs after birth F. (..... C.)

CASE NO. 3.

CASE NO. 3.

CASE NO. 3.

CASE NO. 3.

HISTORY.

DATE.	RECTAL TEMP.		PULSE.		RESP.		MOTIONS.		URINE.	EYES.	CORD.	WEIGHT.
	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	Day	Night				
												.....gm (.....lb. .....oz)

Examination days after birth.

Eyes { Right ; Umbilicus ; Buttocks ; Genitals
Left ; General condition

{ Nursing
Feeding ; General condition

MEASUREMENTS.

DIAMETERS.

Occipito-frontal	11 $\frac{1}{2}$	cm. (..... in.)
" mental	13	" (..... in.)
Sub-occipito-bregmatic	10	" (..... in.)
Bi-parietal	9	" (..... in.)
<i>Bi-temp</i> Shoulders	7	" (..... in.)
Hips		" (..... in.)

CIRCUMFERENCES.

Occipito-frontal	32 $\frac{1}{2}$	cm. (..... in.)
Occipito-mental		" (..... in.)
Sub-occipito-bregmatic	29	" (..... in.)

Length of child 47 cm. (..... in.)

—:o—

GENERAL REMARKS.

CASE NO. 3.

RECORD OF CHILD.

Baby Wilson Sex ♂

Weight gm. lbs. oz. Born A.M. P.M. 19

Mother's Name and age Wilson Jeanné
para. Health

Previous History

Caput Succedaneum

Umbilical Cord

Delivery

Duration hrs. mins.

—:o:—

NOTES AT TIME OF BIRTH.

Primary Respirations { Spont. } in min.
Artif. }

Cry

Circulation ; Pulse

Injuries { Head
Face
Body

Tongue-tie ; Eyes ; Anus ;

Umbilicus ; Genitals

Temperature F. (..... C.)

Taken in rectum 5 mins. after birth.

Temperature 6 hrs after birth F. (..... C.)

CASE NO. 2.

CASE NO. 2.

CASE NO. 2.

CASE NO. 2.

Feb 24/07

Child born at 10¹⁰ p.m. Head rather small & elongated Caput on front of left jaw. No report found Measles at delivery. Navel swabbed & alcohol and dry dressing applied

Feb 26 - Caput much smaller

Mar 1. Navel ok. Breast fed

Mar 2 Cord detached

Mar 4 Fontanelle still
quite large

Mar 6 Child in good condition
cries most at time

Mar 8 Discharged in fair cond.

HISTORY.

DATE.	RECTAL TEMP.		PULSE.		RESP.		MOTIONS.		URINE.	EYES.	CORD.	WEIGHT.
	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	Day	Night				
1907												gm (..... lb. oz)
Feb. 24	98	-	-	-			1 Me 99	/	/	/	/	2350
25	98	-					" "	/	/	/	/	2300
26	98						Ys (red)	/	/	/	/	22.65
27	96						Young Meas	/	/	/	/	22.35
28	98						Ys (w)	/	/	/	/	22.35
Mar 1	97 ²						Yellow. red	/	/	cord detached		2330
2	97 ⁸						Yg (red)	/	/			2335
3	99						Yellow red	/	/			2300
4	98						Yg (red)	/	/			2420
5	96						Yellow red	/	/			2380
6	98						Yg -	/	/			2450
7	97 ³						Yellow "	/	/			2370
												- 2385

Examination days after birth.

Eyes { Right ; Umbilicus *7th day detach* ; Buttocks *v* ; Genitals *0*

{ Nursing *Mother* ; Feeding ; General condition *Fairly Good*

MEASUREMENTS.

DIAMETERS.

Occipito-frontal	10	cm. (..... in)
" mental.....	11. 25	" (..... in.)
Sub-occipito-bregmatic.....	9	" (..... in.)
Bi-parietal.....	8.5	" (..... in.)
Shoulders.....	29	" (..... in.)
Hips.....	25	" (..... in)

CIRCUMFERENCES.

Occipito-frontal.....	30	c.m. (..... in)
Occipito-mental.....		" (..... in.)
Sub-occipito-bregmatic.....	29	" (..... in.)

Length of child cm. (..... in.)

—o:—

GENERAL REMARKS.

Child rather small

CASE NO. 2.

RECORD OF CHILD.

Baby Bastien Sex M
Weight 2.350 gm. lbs. oz. Born 10¹² P.M. Feb 24 1907
Mother's Name and age Mary Bastien age 19
1 para. Health OK

Previous History

Caput Succedaneum left. Front.

Umbilical Cord long and thin
Magnuma Prostetion

Delivery Natural

Duration hrs. mins.

—:0:—

NOTES AT TIME OF BIRTH.

Primary Respirations { Spont. } in min.

Cry ✓

Circulation ✓; Pulse 144

Injuries { Head
Face none
Body

Tongue-tie no; Eyes OK; Anus OK;

Umbilicus OK; Genitals OK.

Temperature F. (..... C.)
Taken in rectum 5 mins. after birth.

Temperature 6 hrs after birth F. (..... C.)

CASE NO. 1.

CASE NO. 1.

CASE NO. 1.

CASE NO. 1.

Child born at 10³⁰ AM. Feb 22 1907.
Cord was wound 3 times around
his neck. Cord was cut between
two ligatures and ^{child} fetus delivered.
Child was severely asphyxiated
and cyanosed on birth.

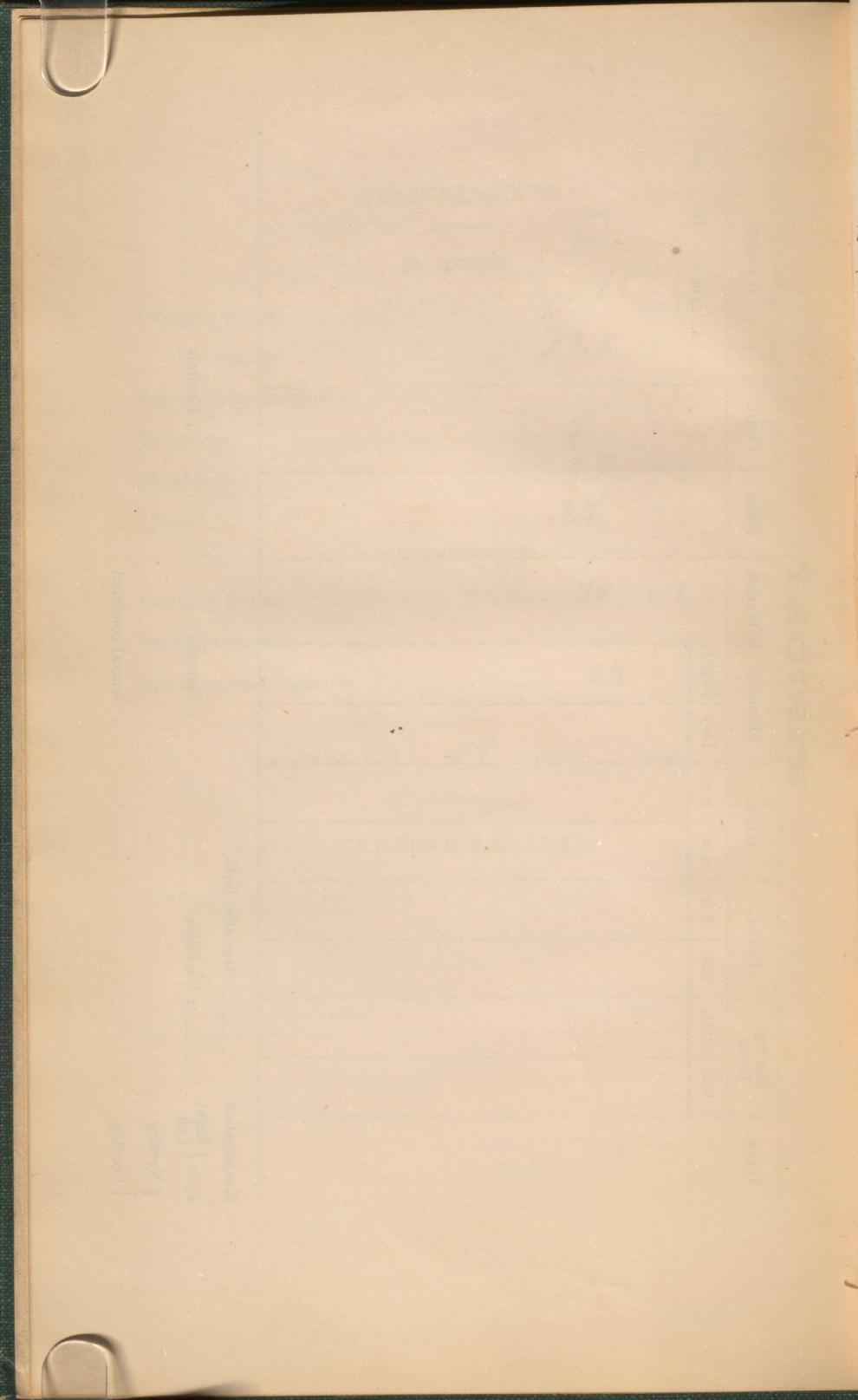
Resuscitation practised as follows
Child plunged alternately into
hot and cold water, T_j not H₂O not
exceeding 104°

" Byrd Method

" Schultze Method

" By Tongue traction of Laerde

" Direct Disruption.



HISTORY.

DATE.	RECTAL TEMP.		PULSE.		RESP.		MOTIONS.		URINE.	EYES.	CORD.	WEIGHT. .....gm (.....lb. ....oz)
	A.M.	P.M.	A.M.	P.M.	A.M.	P.M.	Day	Night				

Examination days after birth.

Eyes { Right ; Umbilicus ; Buttocks ; Genitals
Left

{ Nursing
Feeding ; General condition

MEASUREMENTS.

DIAMETERS.

Occipito-frontal	11.36	cm. (..... in.)
" mental	13.5	" (..... in.)
Sub-occipito-bregmatic		" (..... in.)
Bi-parietal	9	" (..... in.)
Shoulders	33	" (..... in.)
Hips	29	" (..... in.)

CIRCUMFERENCES.

Occipito-frontal	34	c.m. (..... in)
Occipito-mental		" (..... in.)
Sub-occipito-bregmatic	33	" (..... in.)

Length of child..... 49 cm. (..... in.)

—:o:—

GENERAL REMARKS.

CASE NO. 1.

RECORD OF CHILD.

Baby Kreffanen Sex M

Weight 2500 gm. lbs. oz. Born 10³⁰ A.M. Feb. 22 1907

Mother's Name and age Meganda Kreffanen 23
1 para. Health Good

Previous History Good

Caput Succedaneum

Right Occipital Region

Umbilical Cord

Delivery

Duration hrs. mins.

—:o:—

NOTES AT TIME OF BIRTH.

Primary Respirations { Spont. } in 6-8 min.
Artif.

Cry 10 min. Glee

Circulation Very Poor; Pulse Wk. Rapid

Injuries { Head Strong
Face
Body

Tongue-tie None; Eyes ✓; Anus ✓;

Umbilicus ✓; Genitals ✓

Temperature F. (C)
Taken in rectum 5 mins. after birth.

Temperature 6 hrs after birth F. (C)

**Table Showing Growth in Height and
Weight of Child.**

AGE.	HEIGHT.	WEIGHT.
Birth,	.19 in....	7 lbs.
1 day	.....	6 " 11 oz.—Lost 5 oz.
2 days,	.....	6 " 8½ " " 2¼ "
3 " "	.....	6 " 9¾ " —Regained 1 oz.
4 "	.....	6 " 11 " " 1¼ "
5 "	.....	6 " 12¾ " " 1¾ "
6 "	.....	6 " 14 " " 1¼ "
7 "	.....	7 "Original weight.
1 month,	.20½ in..	8 "
2 months,	.21 " ..10 "	.....Gained 1 oz. a day.
3 "	.22 " ..11¼ " {	.....Gained 5 oz. a week.
4 "	.23 " ..12½ " {	.....Double the original weight.
5 "	.23½ " ..14 " {	
6 "	.24 " ..15 " {	
7 "	.24½ " ..16 " {	
8 "	.25 " ..17 " {	
9 "	.25½ " ..18 " {	.....Gained 1 lb. and ½ inch a month.
10 "	.26 " ..19 " {	
11 "	.26½ " ..20 " {	
I year,	.27 " ..21 "	

Capacity of stomach of infant at birth = 1/100 body-weight approximately.

Average quantity of food at each meal at birth = 1 oz.

Average rate of increase (each feeding) 3 lbs. each week for first six months.
subsequently somewhat less.

Intervals between feedings—2 hours at birth, increased gradually to 3 hours by
the end of the 3rd month.

Temp. of food for young infants, 100° F.

Formula.	Fat.	Sugar.	Proteids.	Age of child.
I.	2	6	0.6	From 3rd to 14th day.
II.	2.5	6	0.8	" 2nd to 6th week.
III.	3	6	1	" 6th to 10th "
IV.	3.5	7	1.5	" 10th week to 5th month.
V.	4	7	2	" 5th to 10th month.

A sufficient quantity of food for 24 hours is prepared in the morning, the amount for each feeding being put into a sterile glass bottle and closed with a plug of absorbent cotton. The bottles are put on ice or in a cool place till required. The following table gives the proportions of the various ingredients to make a day's food of the different formulæ. If a larger amount is required, the quantity of each ingredient must be increased in proportion.

Formula.	I.	II.	III.	IV.	V.
Milk in ounces,	1	2	3	8	11 1/4
Cream, " "	1	2	3	3 1/2	3 3/4
Limewater, " "	3/4	1 1/2	1 1/2	1 1/2	1 1/2
Water, " "	9 1/4	14 1/2	16 1/2	15	13 1/2
Milk-Sugar, even tablespoonfuls,	1 1/2	2 1/2	3	3 1/2	4
Total in ounces,	12 oz.	20 oz.	24 oz.	28 oz.	30 oz.

If top-milk is preferred, the quantity used should be equal to that of the milk and cream Formula combined. In Formlua I., II., III., a 12 % top-milk is used (upper 1/5 after standing 4-5 hours); in Formula IV., V., an 8 % top-milk is used (1/3 after standing 4-5 hours.)

Formula.	Age.	No. Feedings in 24 hours.	Interval between Feedings by Day.	No. Night Feedings 10 p.m.-7 a.m.	Quantity for one Feeding.	Quantity for 24 hours.
I.	2-14 days.	10	2 hrs.	2	1-2 1/2 oz.	10-25 oz.
II.	2-5 wks.	10	2 "	2	2-3 1/4 "	20-32 "
III.	5-10 wks.	8	2 1/2 "	1	3-4 1/2 "	24-36 "
IV.	10 wks.-4 mos	7	3 "	1	4-6 "	28-42 "
V.	4-9 mos.	6	3 "	0	5-8 "	30-48 "

INFANT FEEDING.

Comparison of Breast and Cow's Milk.

Percentages.	Fat.	Sugar.	Proteids.	Reaction.	Sterility.
Breast Milk..	4	7	1.50	Alkaline.	Sterile.
Cow's Milk..	4	4.50	4	Acid.	Not sterile when it reaches the child.

The modification of cow's milk to make it a suitable food for infants is based upon 3 essential principles :—

1. The milk must be diluted with water, to reduce the proteids.
2. Sugar and cream must be added, to restore the sugar and fat which have been diminished by the dilution with water.
3. The milk must be made alkaline and sterile.

SUGAR is restored by dissolving milk-sugar, or cane-sugar, (granulated) in the water used for dilution.

1 even tablespoonful of { milk-sugar to 8 oz. of food.
cane-sugar to 12-16 oz. “

Dissolve the sugar in *boiling* water, and if the solution is not clear, filter it through $\frac{1}{2}$ in. of absorbent cotton in a funnel.

FAT is restored by using for dilution a mixture of equal parts of ordinary cream (20 % fat) and plain milk. Instead of the cream and milk, an equal quantity of 12 % top milk may be used. This is obtained by putting a quart of fresh milk into a tall glass fruit jar or milk bottle, and standing it on ice or in a cool room for four or five hours. At the end of that time, the upper $1/5$ (6 oz. from the quart) contains : Fat, 12 %; Proteids, 4 %. If the milk is very rich, the upper $1/4$ (8 oz.) may be used. This upper $1/5$ or $1/4$ is skimmed off and is used as the primary formula for dilution, being equivalent to the same bulk of a mixture of equal parts of milk and cream.

ALKALINITY is secured by adding to 16-20 oz. of food { Lime water, 1 oz.
or
Sod. Bicarb., $\frac{1}{4}$ of an even teaspoonful.

CHILD.

Average weight,	3000 to 3600 grammes (6.6 to 7.9 lbs.)
" height,	48 to 54 centimetres (18.9 to 21.26 in.)
Umbilical cord, av. length,	50 centimetres (19.69 in.); 0 to 200 cm. (0 to 78.74 in.)
Placenta, av. weight, 1/5 weight of child, i.e.,	600-1000 grammes (1.32 to 2.2 lbs.)

DIAMETERS,—

Head—Occipito-frontal (O.F.)	11.5 to 12 cm. (4.53 to 4.72 in.)
Occipito-mental (O.M.)	13 cm. (5.12 in.)
Sub-occipito-bregmatic (S.O.B.)	9½ cm. (3.74 in.)
Biparietal, (B.P.)	9¼-9½ cm. (3.64-3.74 in.)
Bitemporal, (B.T.)	8 cm. (3.15 in.)
Shoulders,	12 cm. (4.72 in.)
Hips,	9.5-10 cm. (3.74-3.94 in.)

CIRCUMFERENCES,—

Occipito-frontal,	32-34 cm. (12.6-13.39 in.)
Sub-occipito-bregmatic,	32 " (12.6 in.)
Occipito-mental,	36 " (14.17 in.)

—:O:—

Normal Pulse and Respiration per Minute.

PULSE.	RESPIRATION.
At birth,	130 to 150
1st month,	120 to 140
1 to 6 months,	about 130
6 to 12 "	" 120
1 to 2 years,	110 to 120
2 to 4 "	110
6 "	100
8 "	88
14 "	87
Adult,	72
	{ 30 to 50, average about 44.
	{ 25 to 35 " " 30.
	—about 28.
	— " 25.
	{ 20 to 25.
	— 16 to 18.

RECORD OF CHILDREN

RECORD OF CHILDREN.

4081481

